THE 2006 NWT ADDICTIONS REPORT

HEALTH AND SOCIAL SERVICES

Northwest Territories Health and Social Services

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Preface

The 2006 NWT Addiction Survey was made possible with the financial support of Health Canada.

Executive Summary

The last report on alcohol and drug use in the NWT was published in 2006 and the last report on tobacco use was published in 2004. The major findings of both reports were that alcohol, illicit drug and tobacco use continue to be large social and public health problems, with prevalence well above the Canadian average. The aim of this report is to present a descriptive summary of select findings from the newer 2006 NWT Addictions Survey, comparing them with findings from previous surveys. It represents an important part of ongoing efforts to monitor alcohol, illicit drug, tobacco use and gambling behavior in the NWT. Below is a list of key findings from the report.

Key Findings

Alcohol

- The prevalence of current drinking among NWT residents aged 15+ remained constant at around 78% between 1996 and 2006.
- There was also little change in the frequency of alcohol use among current drinkers aged 15+. By 2006, 29% of current drinkers reported drinking more than once per week, 17% reported once per week, 33% drank 1 to 3 times per month and 22% drank less than once per month.
- Overall, there was little change in the normal amount of alcohol consumed on a single occasion. By 2006, approximately 42% of current drinkers reported consuming 1 or 2 drinks, 23% drank 3 or 4 drinks and 35% consumed 5 or more drinks in a single sitting. However, the proportion of Aboriginals who reported drinking 5+ drinks on a single occasion declined from 61% to 50%, while prevalence among Non-Aboriginals increased from 19% to 24%.
- Although older residents, Non-Aboriginals, higher education and income groups tend to drink more frequently, younger residents, males, Aboriginals, lower education and income groups tend to drink larger quantities of alcohol when they do drink.
- Consuming 5 or more drinks on a single occasion at least once a month is an indicator of 'regular' binge drinking. The prevalence of monthly binge drinking among current drinkers increased from 33% to 45% between 1996 and 2006. For the population groups, prevalence increased from 44% to 60% among 15 to 24 year olds, 37% to 47% among 25 to 39 year olds and 18% to 38% among 40 to 59 year olds. Prevalence also increased among males (42% to 50%), females (24% to 39%) and Non-Aboriginals (24% to 37%) over the past 10 years.
- Residents aged 15 to 24 were more likely than the older age groups to engage in regular binge drinking. Males were more likely than females and Aboriginals were more likely than Non-Aboriginals to binge drink. University graduates were less likely to binge drink than the other education groups, while high income households had a lower prevalence than both low and middle income households.
- The prevalence of weekly binge drinking changed little between 1996 and 2006. By 2006, around 14% of current drinkers aged 15+ were weekly binge drinkers. Prevalence declined from 23% to 18% among males and from 27% to 16% among Aboriginals between 1996 and 2006. The Aboriginal and Non-Aboriginal drinking gap narrowed considerably. By 2006, there was no significant difference between Aboriginals and Non-Aboriginals in the prevalence of weekly binge drinking.

- Approximately, 37% of current drinkers aged 15+ scored eight or higher on AUDIT (i.e. an identifier of harmful/hazardous drinking patterns). This means that approximately just over one third of the NWT population engaged in hazardous drinking practices.

- Residents aged 15 to 24 were more likely than the older age groups, males were more likely than females and Aboriginals were more likely than Non-Aboriginals to engage in hazardous drinking. University graduates were less likely than the other education groups and high income households were less likely than both low and middle income households to drink hazardously.

Illicit Drugs

- The majority of the NWT population reported using cannabis at least once in their lifetime. Overall, the proportion of lifetime users increased from 53% to 60% between 1996 and 2006.

- Since 2002, the prevalence of past year cannabis use has been stable at around 20% of the NWT population. Residents aged 15 to 24 were more likely than the older age groups, males were more likely than females and Aboriginals were more likely than Non-Aboriginals to have used cannabis in the year prior to the survey. University graduates were less likely than the other education groups to have used cannabis, while both high and middle income households had a lower prevalence than low income households.

- In 2006, it was estimated that around 49% of past year cannabis users were using cannabis at least once a week and could be considered 'regular' users. This means that at least 10% of the NWT population aged 15 and over was using cannabis on a regular or weekly basis.

- Lifetime use of any of the five types of other illicit drugs (i.e. cocaine/crack, hallucinogens, speed, ecstasy and heroin) has remained stable at around 17% between 1996 and 2006. Males were more than twice as likely as females to have used other illicit drugs at least once in their life. Although not significant, the prevalence of past year use of any of the five illicit drugs increased from 2% to 4% between 1996 and 2006.

- Although statistically not significant, the prevalence of past year cocaine/crack use increased from 1% in 1996 to 3% in 2006. By 2006, it is estimated that approximately 2% of the NWT population aged 15+ used either hallucinogens or ecstasy at least once in the year prior to the survey.

- The above estimates on illicit drug use should be treated with caution due to sampling variability. General household surveys such as this one may underestimate the use of illicit drugs. Respondents may be unwilling to report the use of drugs and addicts may be less likely to participate or be sampled in these surveys.

Tobacco

- In the NWT, the proportion of current smokers (i.e. both daily and occasional smokers) appears to be on a downward trend (from 44% to 41%), but the change was not statistically significant. Most of the decline could be attributed to a decline in daily smoking (39% to 30%). However, a modest increase in occasional smoking (6% to 11%) offset the decline.

- For the population groups, only females (45% to 37%) and Aboriginals (63% to 54%) show significant declines in the prevalence of smoking. The increases in occasional smoking among females and Aboriginals were not large enough to offset the declines in daily smoking. Additionally, the proportion of current smokers is on a downward trend among 15 to 24 year olds, 25 to 39 year olds and males, but the changes were not significant. For these groups, the declines in daily smoking were offset by modest increases in the proportion of occasional smokers.

- Males were slightly more likely than females to smoke. Despite the significant declines in smoking, Aboriginals were almost twice as likely as Non-Aboriginals to smoke. University graduates were much less likely to smoke than all other education groups, while high income households had a lower prevalence than both low and middle income households.

- On average, daily smokers are consuming fewer cigarettes than they did 10 years ago. Average daily cigarette consumption declined significantly from 14 to 12 per day between 1996 and 2006. Among males, daily cigarette consumption declined from 16 to 14 per day, while for females it declined from 14 to 11 per day. Males smoked around 3 cigarettes more per day than females and Non-Aboriginals smoked 5 more cigarettes per day than Aboriginals.

- Since 2002, the NWT quit rate has increased steadily from 31% to 38% among current and former smokers. The Aboriginal quit rate increased from 22% in 2002 to 32% by 2006. Similarly, the female quit rate increased from 30% in 2002 to 38% by 2006.

- Older smokers are more likely than younger smokers to have quit smoking. Non-Aboriginals had a higher quit rate than Aboriginals, but the gap has decreased over the past 10 years. University graduates had a much higher quit rate than the other education groups, while high income households had a higher quit rate than both low and middle income households.

- The lifetime use of chewing tobacco appears to be on an upward trend (from 16% to 19%), but the change is not significant. The prevalence of past year chewing tobacco use has remained stable at around 3% of the NWT population aged 15+ between 1996 and 2006.

Harm from alcohol, drug and tobacco use

- In 2006, around 21% of current drinkers aged 15+ reported at least one type of harm as a result of their own drinking. Harmful effects on friendships or social life (10%), physical health (10%), and home life or marriage (8%) were the most common types of harm in the year prior to the survey.

- Self-reported harm from one's own drinking tends to increase with age, where 15 to 24 year olds had a much greater risk of experiencing harm than the older age groups. Aboriginals were almost three times as likely as Non-Aboriginals to experience harm from their own drinking. University graduates had a much lower risk of harm than all other education groups, while high income households had a lower risk of harm than low and middle income households.

- The prevalence of harm as a result of someone else's drinking changed little over the past 10 years. By 2006, around 53% of the NWT population aged 15+ experienced at least one type of harm. The most common types of victimization were insults or humiliation (33%), verbal abuse (29%), serious arguments (29%), pushing and shoving (25%), family or marriage problems (17%) and physical assault (10%).

- The prevalence of victimization tends to decline with age, where 15 to 24 year olds were at a greater risk of harm than the older age groups. Males were at a slightly higher risk than females of being victimized and Aboriginals were more likely than Non-Aboriginals to be harmed as a result of someone else's drinking. University graduates were at a lower risk of victimization than the other education groups.

- In 2006, around 26% of past year drug users (i.e. cannabis, cocaine/crack, hallucinogens, speed, ecstasy and heroin) experienced at least one type of harm. The most common types reported were harm to home life or marriage (14%) followed by friendships or social life (12%), physical health (12%), work or study (8%) and learning difficulties (7%).

- The prevalence of drinking and driving within an hour of consuming 2 or more alcoholic beverages declined from 21% to 14% between 1996 and 2006. Among males, drinking and driving declined from 29% to 18%. Aboriginal prevalence appeared to be on an upward trend between 1996 and 2004 and then declined to 19% by 2006. For Non-Aboriginals, the prevalence declined from 19% to 10% over the past 10 years.

- Males were more than twice as likely as females to drive within an hour of consuming 2 or more beverages. Aboriginals were almost twice as likely as Non-Aboriginals to drink and drive. University graduates were much less likely to drink and drive than all other education groups.

- The percentage of women aged 20 to 44 who reported drinking during their last pregnancy increased from 11% in 1996 to 15% in 2002 and has remained stable since.

- The prevalence of smoking during pregnancy declined significantly from 59% in 1996 to 10% by 2006. Similarly, the percentage of spouses or partners that smoked around a pregnant woman declined from 48% in 2002 to 12% by 2006. It should be noted that modifications were made to the wording of the questions between surveys. Therefore, it is difficult to determine how much of the change is attributable to behavioral changes and how much relates to the modification of questionnaire items.

Gambling

- The vast majority of NWT residents aged 15 or more reported gambling in at least one activity during the past year. However, the prevalence of current gambling declined from 78% to 72% between 1996 and 2006. Additionally, prevalence declined for both males (81% to 73%) and females (76% to 71%) and for both Aboriginals (84% to 76%) and Non-Aboriginals (75% to 68%).

- In 2006, approximately 69% of current gamblers participated in 2 or more types of activities. More traditional activities such as sports betting (30% to 10%), card games (53% to 32%) and pool/billiards (18% to 7%) have been on a downward trend. Other types such as, scratch/Nevada tickets (12% to 49%), slot machines (10% to 21%) and gambling at casinos (7% to 10%) have increased significantly. The prevalence of bingo, lottery tickets and video lottery terminals changed little over the past 10 years.

- The average amount of money spent in a typical week on gambling activities changed little between 1996 and 2006. By 2006, current gamblers were spending a weekly average of $44 on all gambling activities. On average, Aboriginals spent more money than Non-Aboriginals, university graduates spent less money than the other education groups and low-income households spent more money than high-income households.

- The prevalence of regular gambling (i.e. gambled at least once a week) in any activity (i.e. bingo, lottery tickets, scratch/Nevada tickets, sporting events and card games) declined from 29% to 23% between 1996 and 2006. Additionally, prevalence declined for both Aboriginals (39% to 29%) and Non-Aboriginals (22% to 16%). By 2006, playing the lottery regularly (10%) was the most prevalent followed by bingo (8%), scratch/Nevada tickets (6%), card games (6%) and betting on sports events (1%).

- Seniors were significantly more likely than the rest of the population to gamble at least once per week. Aboriginals were almost twice as likely as Non-Aboriginals and all education groups were significantly more likely than university graduates to gamble regularly.

Table of Contents

Introduction	4
Methodology	5
Alcohol	9
Illicit Drugs	18
Tobacco	23
Harm from Alcohol, Drug and Tobacco use	28
Gambling	34
Conclusion	40
Appendix: Detailed Tables	42

List of Tables

Table 2.1.1 Final results for the initial sample by approach and strata, 2006 NWT Addictions Survey 6

Table 2.10.1 Demographic indicators used throughout the 2006 NWT Addictions Report ... 8

Table 3.2.1 Group differences in the frequency of drinking among current drinkers aged 15+, NWT 2006 11

Table 3.3.1 Group differences in the usual number of drinks in a single sitting among current drinkers aged 15+, NWT 2006 12

Table 3.4.1 Group differences in the type of drinker among residents aged 15+, NWT 2006 ...14

Table 4.2.1 Frequency of cannabis use in the past 3 months among past year users aged 15+, NWT 2004 and 2006 20

Table 4.3.1 Prevalence of lifetime and past year use of other illicit drugs among residents aged 15+, NWT 1996 - 2006 21

Table 6.1.1 Harm from own drinking among current drinkers aged 15+ by type, NWT 2004 and 2006 28

Table 6.2.1 Harm as a result of someone else's drinking among residents aged 15+ by type, NWT 1996 - 2006 29

Table 6.3.1 Harm from illicit drug use among past year users aged 15+ by type, NWT 2004 and 2006 30

Table 6.5.1 Drinking during pregnancy among women aged 20 to 44 years, NWT 1996 - 2006 33

Table 6.6.1 Smoking during pregnancy among women aged 20 to 44 years, NWT 1996 - 2006 33

Table 7.2.1 Prevalence of gambling in the past year by type among current gamblers aged 15+, NWT 1996 - 2006 36

Table 7.2.2 Group differences in the prevalence of gambling by select types among current gamblers aged 15+, NWT 2006 36

Table 7.4.1 Prevalence of regular gambling by type among residents aged 15+, NWT 1996 - 2006 39

List of Figures

Figure 3.1.1 Overall trend in the proportion of current drinkers aged 15+, NWT 1996 - 2006 ...9

Figure 3.1.2 Group differences in the proportion of current drinkers aged 15+, NWT 2006 ... 9

Figure 3.2.1 Overall trends in the frequency of drinking among current drinkers aged 15+, NWT 1996 - 2006 10

Figure 3.3.1 Overall trends in the usual number of drinks on one occasion among current drinkers aged 15+, NWT 1996 - 2006 12

Figure 3.4.1 Overall trends in type of drinker among residents aged 15+, NWT 1996 - 2006 13

Figure 3.5.1 Overall trend in heavy monthly drinking (5+ drinks) among current drinkers aged 15+, NWT 1996 - 2006 14

Figure 3.5.2 Group differences in heavy drinking at least once per month among current drinkers aged 15+, NWT 1996 - 2006 15

Figure 3.5.3 Overall trend in heavy weekly drinking (5+ drinks) among current drinkers aged 15+, NWT 1996 - 2006 16

Figure 3.5.4 Group differences in heavy drinking at least once per week among current drinkers aged 15+, NWT 1996 - 2006 16

Figure 3.6.1 Group differences in harmful/hazardous drinking (AUDIT) among current drinkers aged 15+, NWT 2006 17

Figure 4.1.1 Overall trend in the prevalence of lifetime cannabis use among residents aged 15+, NWT 1996 - 2006 18

Figure 4.1.2 Group differences in the lifetime prevalence of cannabis use among residents aged 15+, NWT 2006 19

Figure 4.2.1 Overall trend in the prevalence of past year cannabis use among residents aged 15+, NWT 1996 - 2006 19

Figure 4.2.2 Group differences in the prevalence of past year cannabis use among residents aged 15+, NWT 2006 20

Figure 4.3.1 Lifetime and past year use of other illicit drugs among residents aged 15+, NWT 1996 - 2006 21

Figure 4.3.2 Group differences in the lifetime use of cocaine/crack and hallucinogens among residents aged 15+, NWT 2006 22

Figure 5.1.1 Smoking status in the past 12 months among residents aged 15+, NWT 1996 - 2006 23

Figure 5.1.2 Group difference in smoking status among residents aged 15+, NWT 2006 24

Figure 5.2.1 Overall trend in the average number of cigarettes per day among daily smokers aged 15+, NWT 1996 - 2006 25

Figure 5.2.2 Group differences in the average number of cigarettes smoked per day among daily smokers aged 15+, NWT 2006 25

Figure 5.3.1 Overall trend in the quit rate of 'ever smokers' (current and former) aged 15+, NWT 1996 - 2006 26

Figure 5.3.2 Group differences in the quit rates among 'ever smokers' (current and former) aged 15+, NWT 2006 26

Figure 5.4.1 Overall trends in lifetime and past year chewing tobacco use among NWT residents aged 15+, NWT 1996 - 2006 27

Figure 5.4.2 Group differences in Lifetime chewing tobacco use among NWT residents aged 15+, NWT 2006 27

Figure 6.1.1 Group differences in harm from own drinking among current drinkers aged 15+, NWT 2006 29

Figure 6.2.1 Group differences in harm as a result of someone else's drinking among residents aged 15+, NWT 2006 30

Figure 6.4.1 Overall trend in driving within 1 hour of consuming 2+ drinks among current drinkers aged 15+, NWT 1996 - 2006 31

Figure 6.4.2 Group differences in driving within 1 hour of consuming 2+ drinks among current drinkers aged 15+, NWT 2006 32

Figure 7.1.1 Overall trend in the prevalence of current gambling among residents aged 15+, NWT 1996 - 2006 34

Figure 7.1.2 Group differences in the prevalence of current gambling among residents aged 15+, NWT 2006 35

Figure 7.2.1 Multiple types of gambling in past year among current gamblers aged 15+ NWT, 1996 - 2006 35

Figure 7.3.1 Overall trend in money spent in a 'typical' week of gambling among current gamblers aged 15+, NWT 1996 - 2006 37

Figure 7.3.2 Group differences in money spent in a 'typical' week of gambling among current gamblers aged 15+, NWT 2006 38

Figure 7.4.1 Overall trend in regular gambling at any of the 5 types among residents aged 15+, NWT 1996 - 2006 38

Figure 7.4.2 Group differences in regular gambling at any of the 5 types among residents aged 15+, NWT 2006 39

1. Introduction

In 2004, Health Canada and the Canadian Executive Council on Addictions collaborated to conduct the Canadian Addiction Survey (CAS). Key objectives of the CAS included: (1) determine the prevalence and patterns of alcohol and drug use in Canada; (2) measure the extent of harms associated with the use of alcohol and drugs; (3) identify risk factors related to the use of drugs and alcohol; and (4) provide baseline data for future evaluations of the Canadian Drug Strategy. Similarly, the Canadian Tobacco Use Monitoring Survey (CTUMS) was initiated in 1999 to provide Health Canada with reliable and continual data on tobacco use and related issues. Residents of the ten provinces aged 15 years and older were included in the surveys, while residents of the three territories were excluded. To address this gap, Health Canada allotted additional funding to conduct the Addictions and Northern Tobacco Use Monitoring Survey (NTUMS) surveys in the NWT.

In August 2006, an agreement was reached between Health Canada and the GNWT Department of Health and Social Services to carry out the second cycle of the NWT Addictions and NTUMS Surveys. In turn, the Department of Health and Social Services contracted the NWT Bureau of Statistics to carry out the surveys and provide data files to Health Canada and NWT Health and Social Services. The 2006 NWT Addiction Survey represents an important ongoing effort to monitor alcoh)l, illicit drugs, tobacco use and gambling activities in the NWT.

1.1 Objective of the Report

A primary objective of the report is to provide information about the trends and patterns of alcohol, illicit drug, tobacco use and gambling activities in the Northwest Territories. An additional objective is to provide continuous access to comparable prevalence data against which changes in prevalence can be monitored. Although the main focus of the report is on the results from the 2006 NWT Addictions Survey, data was also utilized from surveys conducted since 1996[1]. Analyzing the trends in prevalence from 1996 to 2006 will provide insight into the long-term patterns of substance use and gambling activities and the programs designed to prevent or treat these issues. This report focuses on exploring patterns or differences that are likely to be meaningful for program planning purposes.

1.2 Organization of the Report

The report is divided into seven chapters. The first presents an overview of survey design and other methodological issues, the next three chapters present information about the prevalence and trends of alcohol, drug and tobacco use in the territory for different population subgroups. Chapter six looks at trends in alcohol, drug and tobacco-related problems, and Chapter seven provides a profile of gambling activities in the NWT.

[1] All data used in this report are taken from the following surveys: 1996 NWT Alcohol and Drug Survey, 2002 NWT Alcohol and Drug Survey, 2004 NTUMS Survey, 2004 NWT Addictions Survey, 2006 NWT Addictions Survey. In 2004, NTUMS was given as a separate survey from the 2004 NWT Addictions survey, whereas it was combined with the 2006 NWT Addictions survey.

2. Methodology

The target population of the 2006 NWT Addictions survey included all residents 15 years of age and older who resided in the Northwest Territories, with the exception of full-time residents of institutions.

2.1 Survey Questionnaire

The 2006 NWT Addictions Survey instrument was developed by the GNWT Department of Health and Social Services and the NWT Bureau of Statistics. The NWT Bureau of Statistics conducted the survey operations and data processing on behalf of the Department. NTUMS items (i.e. the tobacco portion of the questionnaire) are based on the core content of the Canadian Tobacco Use and Monitoring Survey (CTUMS) questionnaire, as identified by Health Canada. Alcohol and illicit drug items in the questionnaire are derived from the core content of the Canadian Addictions Survey, as identified by Health Canada.

All of the content of the alcohol and illicit drug related questions are the same, with the exception of heavy/binge drinking. In the Canadian Addictions survey, men were asked how often they consumed five or more drinks on one occasion, while women were asked how often they consumed four or more drinks on one occasion. In contrast, the NWT survey asked both men and women how often they consumed five or more drinks on one occasion. As a result, NWT estimates for the prevalence of heavy drinking among females may be more conservative than those estimated using 4 or more drinks as an indicator of regular heavy drinking.

2.2 Sample Design

The 2006 NWT Addictions Survey was based on a probability proportional to size stratified multistage sampling design. All NWT communities were divided into the following seven strata: Yellowknife, Hay River, Fort Smith, Inuvik, Norman Wells, 11 communities in the northern part of the territory, and 16 communities in the southern portion. The first five strata were entered into the sample, while 5 communities in the northern and 10 communities in the southern portions were randomly selected from the last two strata. Households in Yellowknife, Hay River, Fort Smith and Inuvik were selected at random using random digit dialing. Households in the other strata were randomly selected using a dwelling list maintained by the NWT Bureau of Statistics. One respondent 15 years or older was randomly selected from each household. Interviews were conducted by telephone in households selected using random digit dialing and face-to-face interviews were conducted in the other selected households. Refer to the NWT Bureau of Statistics for the methodological information from the previous surveys.

2.3 Sample Size

Table 2.1.1 shows the final results for the initial sample by approach and strata of the 2006 NWT Addictions Survey. A total of 1,235 NWT residents completed the 2006 NWT Addictions Survey. The overall response rate was around 76%, where strata response rates ranged from a low of 68% in Hay River to a high of 83% in the selected small communities. Refer to the NWT Bureau of Statistics for the response rates of the previous surveys.

TABLE 2.1.1 Final results for the initial sample by approach and strata, 2006 NWT Addictions Survey

Operations	All Households	Completed	Refusal	Unable to Contact[1]	Response Rate (%)
All Operations	1,633	1,235	246	152	76
Phone Operations	1,042	753	200	89	72
Inuvik	161	118	30	13	73
Fort Smith	83	62	12	9	75
Hay River	137	93	29	15	68
Yellowknife	661	480	129	52	73
Face-to-Face Operations	591	482	46	63	82
Norman Wells	31	25	3	3	81
Small Northern Communities	200	158	17	25	79
Small Southern Communities	360	299	26	35	83

[1] Included in this category are respondents that couldn't be reached, respondents with language issues and respondents unavailable for the duration of the survey.

Source: NWT Bureau of Statistics

2.4 Weighting

A goal of any probability sample is to select a small subset of individuals that share similar characteristics to the rest of the population. In other words, the objective is to select a small number of individuals whose behaviour will represent the behaviour of all individuals in the population. Based on that small sample, inferences or predictions can be made about the total population. To help achieve this goal, respondents are given a sample weight, which depends on their age, sex and ethnicity. Sample weights help compensate for unequal probabilities of selection, non-coverage of the population and non-response bias. The sum of the weights over the sample provides an estimate of the population size. Population estimates used for weighting are produced by Statistics Canada and community estimates are produced by the NWT Bureau of Statistics. Table 1 in the Appendix shows the sample size of each survey and the corresponding population estimate when the weights are applied to the data.

2.5 Partial Non-response

Partial non-response occurs when a respondent did not answer a question or could not recall the requested information. Partial non-response can either be included or excluded when presenting survey results. In this report, partial non-responses were excluded when estimates were calculated. By excluding those that did not state an answer, assumptions are made about the responses they would have provided (i.e. their responses would follow the same distribution as participants that provided an answer). The exception is with income adequacy. Generally, around 17% of respondents did not provide an answer about their household income. Thus, a 'not stated' category was created for these respondents and treated as if it was an actual income group. In the 2006 survey, most indicators have a relatively low non-response rate. The non-response rate for 'money spent on gambling' was around 6%, while for most indicators the non-response rate was less than 1%.

2.6 Sampling Error

Standard errors were estimated with a formula assuming simple random sampling. This assumption is not technically correct because the survey uses stratification, multiple stages of selection and post survey weighting. In turn, not adjusting for these factors (i.e. complex survey design) can lead to biased point and variance estimates. Generally, stratification of homogenous groups can reduce standard errors, while cluster sampling tends to increase the standard errors relative to simple random sampling. A byproduct of weighting is that when the variances of the weights are large, it can lead to larger standard errors than estimates

based on un-weighted cases. These issues were addressed in the 2004 NTUMS and NWT Addictions Surveys, where it was found that almost all territorial level estimates had a design effect less than one. Since the standard errors of the proportions vary little from survey to survey, design effects were not produced for the 2006 survey. Based on the stability of the standard errors, it is assumed that a binomial formula will provide a reliable estimate of the standard errors for each of the indicators.

2.7 Reliability of Estimates

Standard errors are used to estimate the coefficient of variation (CV). The CV is the most widely used measure of reliability and provides an indication of how well the estimate obtained from the sample represents the true population value. According to Statistics Canada's data quality guidelines, an estimate with a CV less than 16.5% is a reliable estimate of the population value. Prevalence estimates based on a small number of respondents will not provide reliable estimates of population values. Sampling variability tends to be high and so does the CV. In this situation, CVs may fall between 16.5% and 33.3% and have moderate sampling variability. These values are shown, but flagged to caution readers (denoted with ^{E} in the tables). Additionally, an estimate may have a CV above 33.3%, which indicates high sampling variability. These values should not be published (denoted with ^{F} in the tables). This report adheres to the above guidelines.

2.8 Comparability of Proportions Over Time

Upward or downward trends observed in the proportions may not always be an indication of behavioural changes in the population. There is always the possibility that these trends are largely the result of changes in survey methods. Two important factors that can affect the comparison of proportions over time are changes in sample selection and the modification of questionnaire items.

First, when different small communities are sampled in each survey, the social and cultural differences between them may result in proportions that fluctuate from one survey to the next. Some communities may have a higher or lower prevalence of a measure, in which the inclusion or exclusion of these communities can lead to proportions that are under or over-estimated. This issue probably has more of an effect on the prevalence measures of Aboriginals, since the vast majority of residents in the smaller communities are of Aboriginal descent.

Second, survey questionnaire items are sometimes modified over time. Questions developed to measure social phenomena are likely to be changed or modified to improve the validity and reliability of measurement. Modifications may improve the validity or reliability of a measure, but there is also the chance that any changes may affect the comparability of questions from previous surveys. In this report, footnotes are included to describe instances on the possible effects of sample selection and where questions have been modified.

2.9 Significance Tests

In this report, two types of significance tests were used. The first test examined for significant differences in the prevalence of a measure between surveys or for trends over time. In most cases, a simple test comparing the binomial proportions by age, gender and ethnicity were used to indicate whether there was a significant upward or downward trend in the prevalence of a measure between 1996 and 2006.

The second test examined for group differences in substance use and gambling behaviour by age, sex, ethnicity, education and income adequacy. Population group differences were only compared using data from the 2006 NWT Addictions Survey, as these patterns tend to remain stable over time. A simple test between two binomial proportions was used to find whether the groups differed in substance use and gambling patterns. Additionally, a reference group was chosen as the basis of comparison for each of the indicators (denoted with ^{1} in the tables). This method helps to convey differences more clearly within the population groups. In both types of tests, an alpha level of .05 ($p < .05$) was used to determine whether significant trends or differences existed (denoted with * in the tables). Note that as these analyses are primarily descriptive in nature, casual interpretations cannot be drawn from any significant trends or differences described throughout the report.

2.10 Demographic Indicators

The substance use and gambling variables are presented with: sex, ethnicity, age, education and income adequacy when possible. Table 2.10.1 gives a description of the demographic indicators used throughout the report.

TABLE 2.10.1 Demographic indicators used throughout the report

Demographics	Categories of the Indicators
Sex	Male; Female
Ethnicity	Aboriginal; Non-Aboriginal
Age	The age groups reflect categories used to weight the survey results to NWT population estimates: 15 - 24; 25 - 39; 40 - 59; 60+. In some cases, 15 - 39 and 40+ is used. The latter is used when measures are based on small numbers or when 15 to 39 year olds (high risk group) have similar prevalence.
Highest Level of Education	Less than secondary - grade 11 or less; completed secondary - high school diploma; Some post-secondary - trades certificate or diploma, or college certificate or diploma; University degree.
Income Adequacy	Based on combination of household income and number of persons in the household. The low-income category is loosely based on Statistics Canada's low-income cutoffs before taxes for the year 2003 and low-income measures before taxes for the year 2002.
	Low income - Less than $20,000, or $20,000 - $39,999 with 3 or more household members, or $40,000 - $59,999 with 7 or more household members.
	High Income -$80,000 - $99,999 with 1 or 2 household members, or $100,000 or more.
	Not Stated - did not report household income.
	Middle Income -All other respondents.

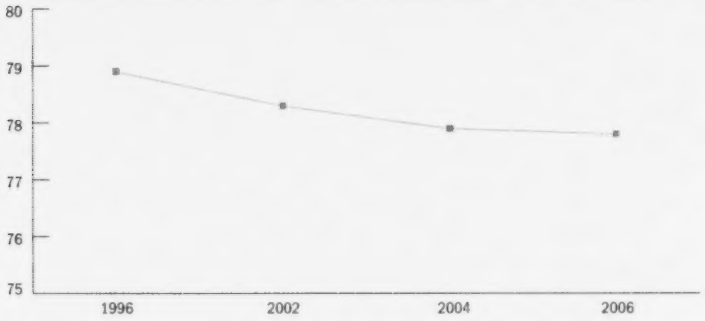
3. Alcohol

This section describes the general trends of alcohol use in the NWT between 1996 and 2006. The section reports on five commonly used measures of alcohol use: drinking status, frequency of drinking, amount usually consumed, type of drinker, regular heavy or binge drinking and harmful/hazardous drinking (AUDIT).

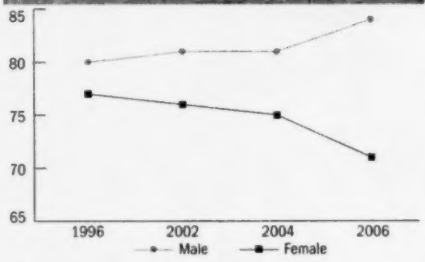
3.1 Current Drinkers

Residents were asked if they consumed alcohol within 12 months prior to the survey. Figure 3.1.1 shows the overall trend in the proportion of current drinkers aged 15+ in the NWT between 1996 and 2006 (refer to Table 2 in the Appendix for all demographic trends). **The proportion of current drinkers in the NWT remained constant at around 78% between** 1996 and 2006. For the population groups, only females show a significant change in drinking status. The prevalence of drinking fell from 77% to 71% among females between 1996 and 2006. Although not significant, the prevalence of drinking appears to be on a downward trend among 15 to 24 and 60+ year olds, but on an upward trend among 25 to 39 and 40 to 59 year olds.

FIGURE 3.1.1 Overall trend in the proportion of current drinkers among residents aged 15+, NWT 1996 - 2006



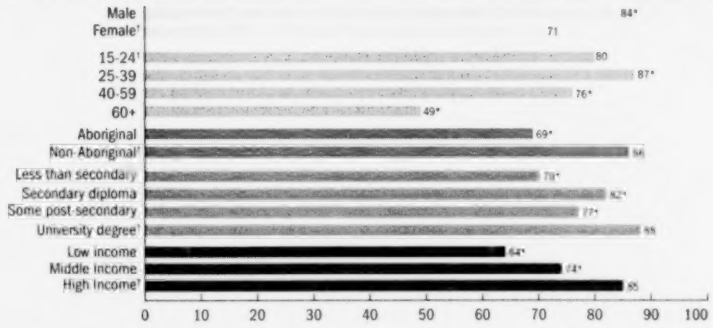
Proportion of current drinkers in the population by sex



· Prevalence of current drinking declined significantly among females (77% to 71%). Although not significant, drinking appears to be on an upward trend among males.

Figure 3.1.2 shows the group differences in the proportion of current drinkers aged 15+ in the NWT (refer to Table 2 in the Appendix as a complement to Figure 3.1.2). Generally, the prevalence of current drinking increases until age 39 and declines thereafter. As such, the 15 to 24 and 25 to 39 age groups have the highest proportion of current drinkers (80% and 87% in 2006) and form the highest risk age group (i.e. ages 15 to 39). Residents aged 15 to 39 years were more likely than 40+ year olds to have consumed alcohol in the past year (85% vs. 70%).

FIGURE 3.1.2 Group differences in the proportion of current drinkers among residents aged 15+, NWT 2006



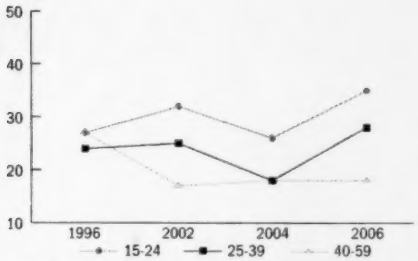
The prevalence of current drinking also differs by sex, where male residents were more likely than females to have had a drink in the past year (84% vs. 71%). Non-Aboriginals were more likely than Aboriginals to have consumed alcohol (86% vs. 69%). Past year alcohol use also varies by the level of education and income adequacy. University graduates were significantly more likely than the other education groups to currently drink (88% vs. 70%, 82% and 77%). Similarly, the prevalence of drinking tends to increase with income, where high income households were more likely than both low income and middle income households to have consumed alcohol (85% vs. 64% and 74%).

3.2 Frequency of Drinking

Current drinkers were asked how often they drank alcoholic beverages in the past year. Figure 3.2.1 shows the overall trend in the frequency of drinking among current drinkers aged 15+ in the NWT between 1996 and 2006 (refer to Table 3 in the Appendix for all demographic trends). Overall, there was little change in the frequency of alcohol use among current drinkers aged 15+ between 1996 and 2006. By 2006, 29% of current drinkers reported drinking more than once per week, 17% drank once per week, 33% drank 1 to 3 times per month and 22% drank less than once per month. For the population groups, only 40 to 59 year olds and females show any significant changes between 1996 and 2006. The frequency of drinking more than once per week increased from 27% to 35% among 40 to 59 year olds and from 13% to 22% among females.

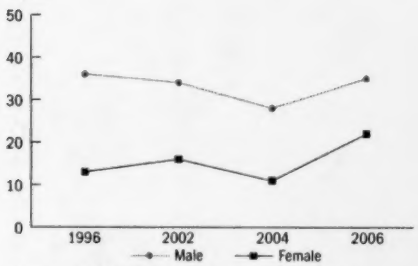
Prevalence of drinking more than once per week by a) age, and b) sex

a) age



- Prevalence of drinking more than once a week increased significantly among 40 to 59 year olds (27% to 35%), while there was no signicant change among 15 to 24 and 25 to 39 year olds.

b) sex



- Prevalence of drinking more than once a week increased significantly among females (13% to 22%). Male prevalence follows a similar pattern, but the trend was not significant.

FIGURE 3.2.1 Overall trends in the frequency of drinking among current drinkers aged 15+, NWT 1996 - 2006

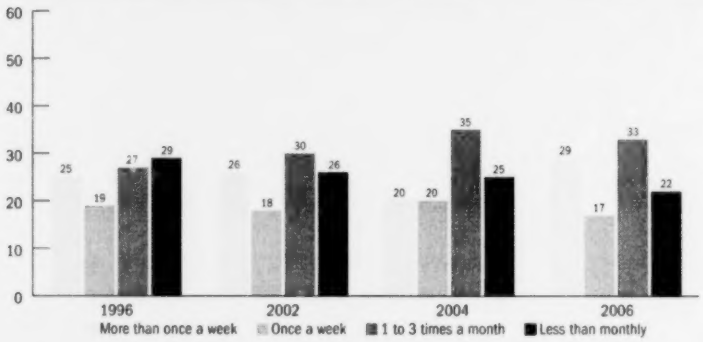


Table 3.2.1 shows the group differences in the frequency of drinking among current drinkers aged 15+ in the NWT. Older NWT residents tend to drink more frequently than younger residents. As such, 25 to 39 year olds were 1.6 times as likely, 40 to 59 year olds were 1.9 times as likely and 60+ year olds were 2.1 times as likely as 15 to 24 year olds to consume alcohol more than once per week (29%, 35% and 38% vs. 18%). In contrast, 15 to 24 year olds were more likely than all other age groups to consume alcohol 1 to 3 times per month (42% vs. 32%, 30%, 16%).

TABLE 3.2.1 Group differences in the frequency of drinking among current drinkers aged 15+, NWT 2006

Demographics	More than once a week	Once a week	1 to 3 times a month	Less than once a month
Male	35*	17	29*	19
Female†	22	17	37	24
15-24†	18	16	42	24
25-39	28*	17	32*	22
40-59	35*	17	30*	18
60+	38*	18[F]	16[F]*	29[F]
Aboriginal	21*	17	38*	25*
Non-Aboriginal†	36	17	29	19
Less than secondary	20*	10[F]*	39	31*
Secondary diploma	31	20	30	18
Some post-secondary	36	20	28	16
University degree†	32	18	32	17
Low income	16[F]*	11[F]	40*	33*
Middle income	27*	17	33	23
High income†	36	18	29	17
Not stated	26*	16[F]	36	21

[F] Moderate sampling variability - interpret with caution.
† Reference category- basis of comparison for the other categories.
* Significant difference at the .05 level.

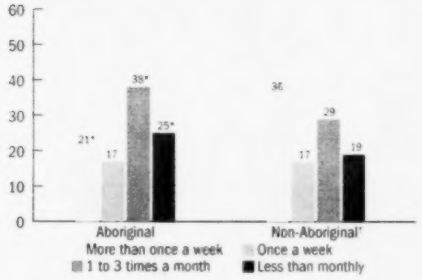
Despite the increasing proportion of females who reported drinking more than once per week, males were still 1.6 times more likely to drink alcohol more than once per week (35% vs. 22%). Aboriginals consumed alcohol on a less frequent basis than Non-Aboriginals. Aboriginals were more likely to drink 1 to 3 times per month (38% vs. 29%) and less than monthly (25% vs. 19%), while Non-Aboriginals had a higher prevalence of drinking more than once per week (36% vs. 21%). On average, all education groups were around 1.7 times as likely as those with a less than secondary level of schooling to drink more than once per week (31%, 36% and 33% vs. 20%). Likewise, high income households were 2.3 times as likely as low income and 1.3 times as likely as middle income households to consume alcohol more than once per week (36% vs. 16% and 27%).

3.3 Normal Amount of Alcohol Consumed on a Single Occasion

Current drinkers were asked how many drinks they usually had when they drank alcohol. The consumption of 5+ drinks in a single sitting is considered a reliable indicator of heavy or binge drinking. Figure 3.3.1 shows the overall trend in the usual volume of alcohol consumed among current drinkers aged 15+ in the NWT between 1996 and 2006 (refer to Table 4 in the Appendix for all demographic trends). Overall, there has been little change in the amount of alcohol consumed on a single occasion between 1996 and 2006. By 2006, approximately 42% of current drinkers reported consuming 1 or 2 drinks, 23% drank 3 or 4 drinks and 35% consumed 5 or more drinks in a single sitting. The only significant trend among the demographic indicators occurred with ethnicity. The proportion of Aboriginals who reported drinking 5+ drinks on a single occasion declined from 61% to 50%, whereas the prevalence among Non-Aboriginals increased from 19% to 24%.

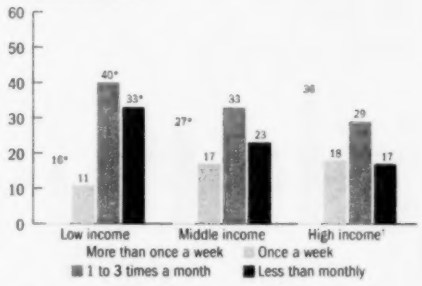
Group differences in the frequency of drinking by a) ethnicity, and b) income adequacy

a) ethnicity



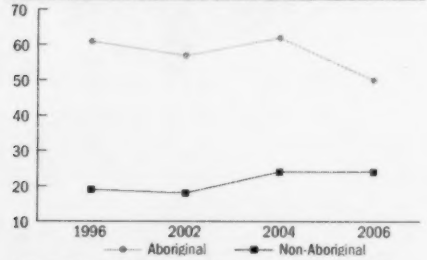
· Generally, Aboriginals consume alcohol less frequently than Non-Aboriginals. As such, Aboriginals were less likely than Non-Aboriginals to drink alcohol more than once a week .

b) income adequacy



· High income households were more likely than both low and middle income households to drink more than once a week.

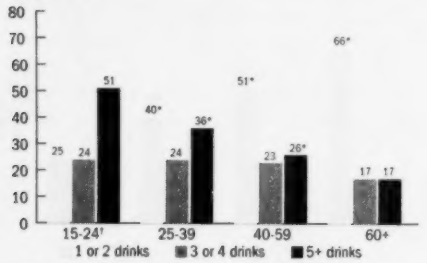
Proportion who normally consumed 5+ drinks on a single occasion by ethnicity



- The prevalence of normally consuming 5+ drinks in one sitting declined significantly among Aboriginals (61% to 50%), while the prevalence increased among Non-Aboriginals (19% to 24%) between 1996 and 2006.

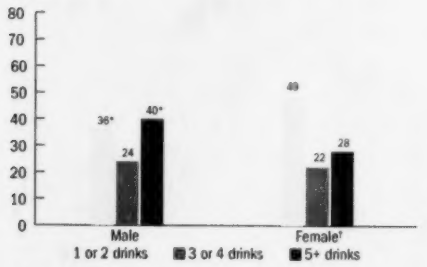
Group differences in the normal amount of alcohol consumed in a single sitting by a) age; b) sex; c) ethnicity; and d) education

a) age



- Although older residents drink more frequently; younger residents consume a larger volume of alcohol when they do drink. As such, 15 to 24 year olds were more likely than all other age groups to normally consume 5+ drinks on a single occasion.

b) sex



- Females tend to consume a lower volume of alcohol. As such, males were more likely to consume 5+ drinks on a single occasion.

FIGURE 3.3.1 Overall trends in the usual number of drinks consumed on a single occasion among current drinkers aged 15+, NWT 1996 – 2006

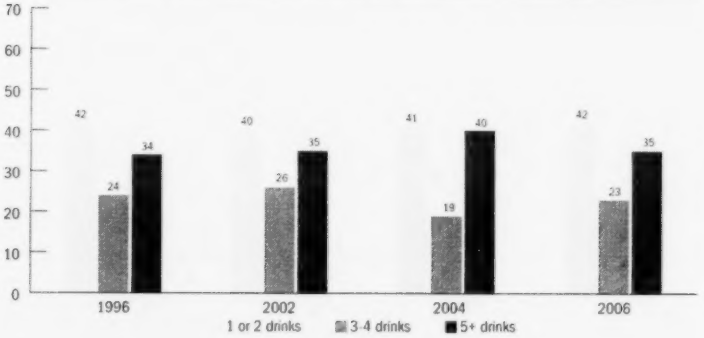


Table 3.3.1 shows the group differences in the volume of alcohol consumed among current drinkers aged 15+ in the NWT between 1996 and 2006. The volume of alcohol consumed on a single occasion tends to decline with age. Although older residents tend to drink more frequently, younger residents tend to drink larger quantities of alcohol when they do drink. As follows, 15 to 24 year olds were 1.4 times as likely as 25 to 39 year olds, 2.0 times as likely as 40 to 59 year olds and 3.0 times as likely as 60+ year olds to consume 5+ drinks on a single occasion (51% vs. 36%, 26% and 17%). Males were more likely than females to consume 5+ drinks on a single occasion (40% vs. 28%). Additionally, Aboriginals tend to drink less frequently than Non-Aboriginals, but they tend to consume a larger volume when they do drink. As such, Aboriginals were around twice as likely as Non-Aboriginals to consume 5+ drinks on a single occasion in the past year (50% vs. 24%). However, the gap in the volume of drinking between Aboriginals and Non-Aboriginals narrowed from 3.2 to 2.1 times the likelihood between 1996 and 2006.

TABLE 3.3.1 Group differences in the usual amount of alcohol consumed in a single sitting among current drinkers aged 15+, NWT 2006

Demographics	1 or 2 drinks	3 or 4 drinks	5+ drinks
Male	36*	24	40*
Female†	49	22	28
15-24†	25	24	51
25-39	40*	24	36*
40-59	51*	23	26*
60+	66*	17[E]	17[E]*
Aboriginal	27*	24	50*
Non-Aboriginal†	53	23	24
Less than secondary	27*	26	47*
Secondary diploma	40*	23	38*
Some post-secondary	44*	21	35*
University degree†	62	23	15
Low income	30*	22[E]	48*
Middle income	38*	27*	35
High income†	55	17	29
Not stated	39*	33*	28

[E] Moderate sampling variability - interpret with caution.
† Reference category- basis of comparison for the other categories.
* Significant difference at the .05 level.

The volume of alcohol consumed on a single occasion also varies by education and income adequacy. Again, although university graduates and high income households drink more frequently, they tend to drink lower quantities of alcohol on a single occasion. NWT residents with less than a secondary education were 3.1 times more likely, those with a secondary diploma were 2.5 times more likely and those with some post-secondary education were 2.3 times more likely than university graduates to consume 5+ drinks in a single sitting (15% vs. 47%, 38% and 35%). High income households were almost twice as likely as low and middle income households to consume 1 or 2 drinks on a single occasion (55% vs. 30% and 38%). In contrast, low income households were almost twice as likely as high income households to consume 5+ drinks on a single occasion (48% vs. 29%).

3.4 Type of Drinker

To summarize the above description of alcohol use patterns, the NWT population is subdivided into a drinking/non-drinking typology. The type of drinker is a derived variable based on drinking status, frequency of drinking and the usual amount of alcohol consumed on a single occasion[2].

FIGURE 3.4.1 Overall trends in type of drinker among residents aged 15+, NWT 1996-2006

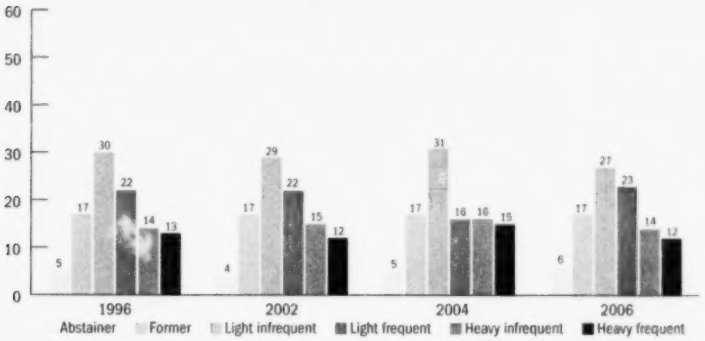
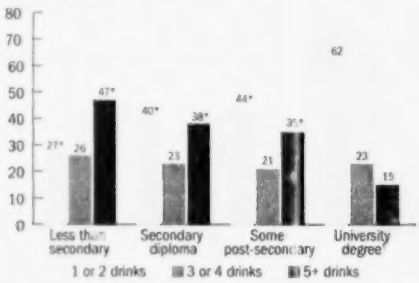


Figure 3.4.1 shows the overall trend in the type of drinker among NWT residents aged 15+ between 1996 and 2006 (refer to Table 5 in the Appendix for all demographic trends). Drinking patterns in the NWT have been relatively constant over the past 10 years. By 2006, 6% of the population aged 15+ were abstainers, 17% were former drinkers, 27% were light infrequent drinkers, 23% were light frequent drinkers, 14% were heavy infrequent drinkers and 12% were heavy frequent drinkers. The most notable change over the past 10 years occurred with ethnicity. For the Aboriginal population, the proportion of heavy frequent drinkers declined from 17% to 12 %, while that of light frequent drinkers increased from 8% to 14%. Conversely, the proportion of heavy frequent drinkers increased from 9% to 13% among the Non-Aboriginal population.

c) ethnicity

* Aboriginals tend to drink less frequently than non-Aboriginals, but they consume a larger volume when they do drink. As such, Aboriginals were twice as likely as Non-Aboriginals to consume 5+ drinks on a single occasion.

d) education

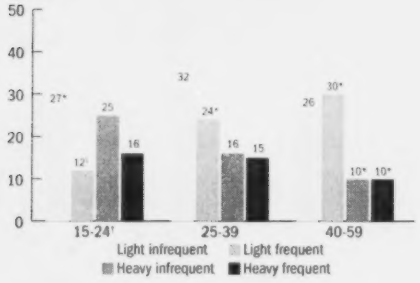


* University graduates were much less likely than the other education groups to normally consume 5+ drinks in a single sitting.

[2] The following defines the type of drinker: ***Lifetime abstainer*** - Never drank alcohol; ***Former drinker*** - Drank, but not in the past 12 months; ***Light infrequent drinker*** - Drank in the past 12 months, but less than once a week and fewer than five drinks; ***Light frequent drinker*** - Drank in past 12 months, once a week or more and fewer than five drinks; ***Heavy infrequent drinker*** - Drank in the past 12 months, less often than once a week and usually five or more drinks; ***Heavy frequent drinker*** - Drank in the past 12 months, once a week or more and five or more drinks.

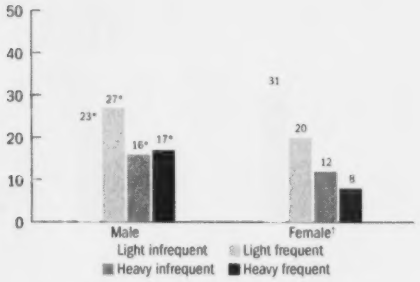
Group differences in the type of drinker by a) age, b) sex, and c) ethnicity

a) age



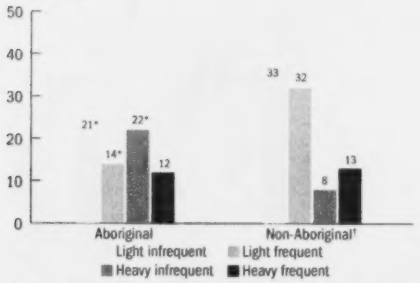
- Younger residents were more likely than older residents to be heavy frequent, heavy infrequent and light infrequent drinkers.

b) sex



- Males were more likely to be heavy frequent, heavy infrequent and light frequent drinkers, while females were more likely to be abstainers, former drinkers and light infrequent drinkers.

c) ethnicity



- Aboriginals were more likely to be abstainers, former drinkers and heavy infrequent drinkers, while Non-Aboriginals were more likely to be light infrequent and light frequent drinkers.

TABLE 3.4.1 Group differences in the type of drinker among residents aged 15+, NWT 2006

Demographics	Abstainer	Former	Light Infrequent	Light Frequent	Heavy Infrequent	Heavy Frequent
Male	4F*	13*	23*	27*	16*	17*
Female†	8	21	31	20	12	8
Aboriginal	7*	25*	21*	14*	22*	12
Non-Aboriginal†	4F	10	33	32	8	13
15-24†	11F	10F	27	12F	25	16
25-39	3F*	10	32	24*	16*	15
40-59	3F*	21*	26	30*	10*	10*
60+	13F	40*	17F*	22*	!	!

! Moderate sampling variability - interpret with caution.
High sampling variability - data was suppressed.
† Reference category- basis of comparison for the other categories.
* Significant difference at the .05 level.

Table 3.4.1 shows the group differences in the type of drinker among NWT residents aged 15+. The younger age groups (consisting of 15 to 39 year olds) were more likely than 40+ year olds to be heavy frequent (14% vs. 9%), heavy infrequent (17% vs. 6%) and light infrequent drinkers (32% vs. 26%). In contrast, residents aged 40+ were more likely to be former drinkers (25% vs. 10%) and light frequent drinkers (29% vs. 21%). Males were more likely than females to be heavy frequent (16% vs. 8%), heavy infrequent (16% vs. 12%) and light frequent drinkers (27% vs. 20%), while females were more likely to be abstainers (8% vs. 4%), former drinkers (21% vs. 13%) and light infrequent drinkers (31% vs. 23%). Aboriginals were more likely than Non-Aboriginals to be abstainers (7% vs. 4%), former drinkers (25% vs. 10%) and heavy infrequent drinkers (22% vs. 8%), while Non-Aboriginals were more likely to be light infrequent (33% vs. 21%) and light frequent drinkers (32% vs. 14%).

3.5 Regular Heavy Drinking

Respondents were asked how many times in the past year they consumed 5+ drinks on a single occasion. The consumption of 5 or more drinks on a single occasion at least once a month is an indicator of 'regular' heavy/binge drinking. Regular heavy drinking has been linked with a large number of adverse health consequences. For instance, high blood alcohol concentration is a major risk factor in a large number of injury related deaths. Long-term heavy drinking also increases susceptibility to a myriad of physical and mental health conditions such as, cirrhosis of the liver, diseases of the circulatory system and depression.

FIGURE 3.5.1 Overall trend in the prevalence of heavy monthly drinking (5+ drinks) among current drinkers aged 15+, NWT 1996-2006

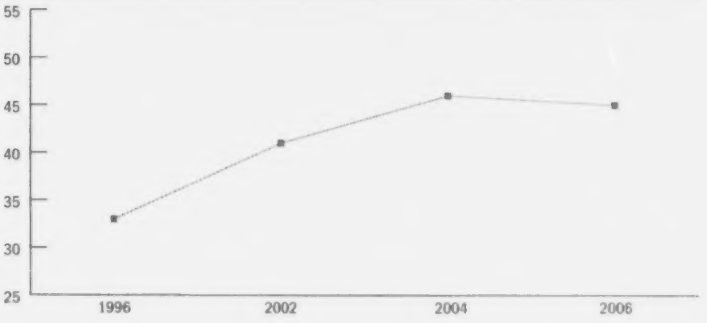
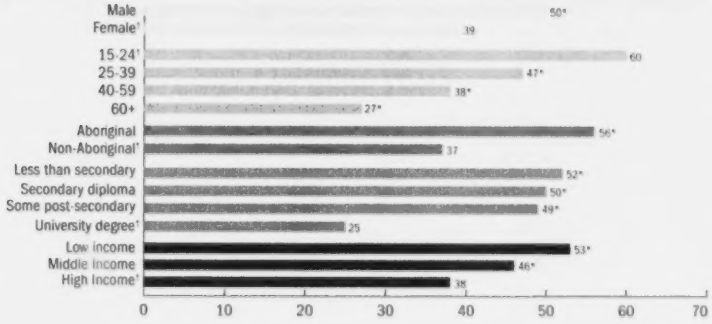


Figure 3.5.1 shows the overall trend in the prevalence of monthly heavy drinking among current drinkers aged 15+ in the NWT between 1996 and 2006 (refer to Table 6 in the Appendix for all demographic trends). The proportion of current drinkers who consumed 5+ drinks at least once per month increased from 33% to 45% between 1996 and 2006[1]. All age groups experienced significant increases in the prevalence of monthly binge drinking, with the exception of 60+ year olds. Prevalence increased from 44% to 60% among 15 to 24 year olds, 37% to 47% among 25 to 39 year olds and 18% to 38% among 40 to 59 year olds[4]. Monthly binge drinking also increased among male (42% to 50%) and female (24% to 39%) residents. For ethnicity, only Non-Aboriginals had a significant increase in monthly binge drinking, where the prevalence rose from 24% to 37% over the past 10 years.

Figure 3.5.2 shows the group differences in the prevalence of monthly heavy drinking among current drinkers aged 15+ in the NWT (refer to Table 6 in the Appendix as a complement to Figure 3.5.2). Regular heavy drinking tends to decline with age. As such, 15 to 24 year olds were around 1.3 times more likely than 25 to 39 year olds, 1.6 times more likely than 40 to 59 year olds and 2.2 times as likely as 60+ year olds to consume 5+ drinks at least monthly (60% vs. 47%, 38%, 27%). Even with the large increases in the prevalence of female binge drinking, males continue to have a higher prevalence of regular heavy drinking (50% vs. 39%). However, the gender gap narrowed from 1.8 times to 1.3 times the likelihood over the past 10 years.

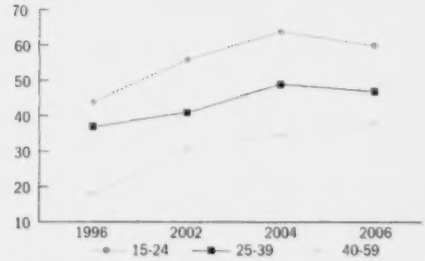
FIGURE 3.5.2 Group differences in heavy drinking at least once per month among current drinkers aged 15+, NWT 1996 - 2006



Despite the large increase in prevalence of binge drinking among Non-Aboriginals, Aboriginal residents were 1.5 times more likely to drink heavily at least once per month (56% vs. 37%). University graduates were significantly less likely to binge drink than all other education groups. Residents with less than secondary, a secondary diploma and some post-secondary levels of education have around double the prevalence of regular heavy drinking (52%, 50% and 50% vs. 25%). Additionally, both low and middle income households were significantly more likely than high income households to drink heavily at least once per month (53% and 46% vs. 38%).

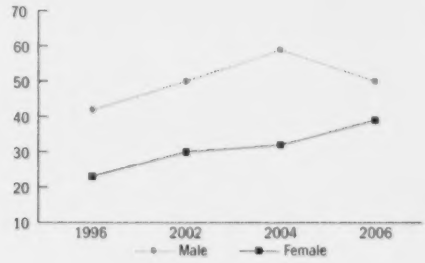
Prevalence of consuming 5+ drinks at least once a month by a) age; b) sex; and c) ethnicity

a) age



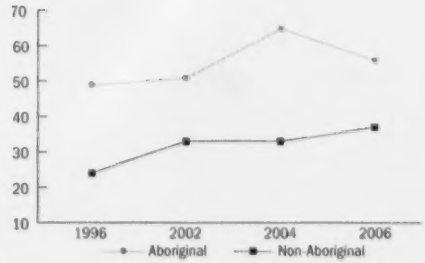
- Prevalence of heavy drinking increased significantly among 15 to 24 year olds (44% to 60%), 25 to 39 year olds (37% to 47%) and 40 to 59 year olds (18% to 38%).

b) sex



- The prevalence of monthly binge drinking increased significantly among both males (42% to 50%) and females (24% to 39%) over the past 10 years.

c) ethnicity



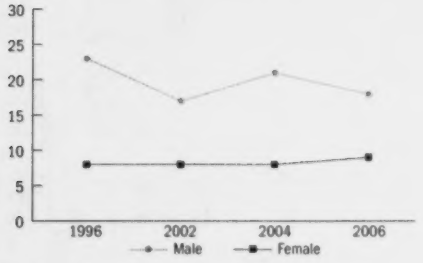
- The prevalence of monthly binge drinking increased significantly among Non-Aboriginals (24% to 37%). For Aboriginals, prevalence was also on an upward trend, but the change was not significant.

[1] Note that not all the increase in the prevalence is the result of actual behavioural changes in the population. Some change is probably also due to modifications in the wording of questionnaire items. In the 1996 Alcohol and Drugs Survey, respondents were provided with an open-ended answer to this question (i.e. respondents had to provide an actual number of times they drank in the past 12 months). Subsequent surveys asked the same question, but provided pre-defined categories most likely to aid in recall (e.g. more than once a week, once a week etc.). The open-ended answer could lead to a higher degree of recall bias (i.e. not remembering events accurately).

[4] The general pattern suggests that binge drinking declines with age. However, in the 1996 Alcohol and Drugs Survey, 60+ year olds have a higher prevalence of binge drinking than 40 to 59 year olds. Thus, it appears that the increase among 40 to 59 year olds would be the least accurate. However, given the upward trend observed between 2002 and 2006, some of the increase may be the result of behavioural changes in the population.

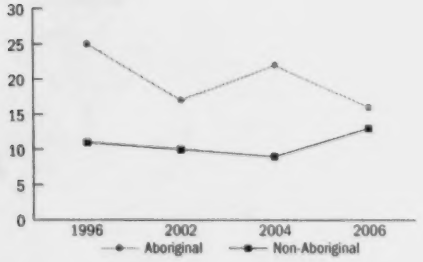
Prevalence of consuming 5+ drinks at least once a week by a) sex, and b) ethnicity

a) sex



- The prevalence of weekly binge drinking declined significantly among males (23% to 18%), while prevalence changed little among females over the past 10 years.

b) ethnicity



- The prevalence of weekly binge drinking declined significantly among Aboriginals (27% to 16%), while there was no significant change in Non-Aboriginal prevalence.

Figure 3.5.3 shows the overall trends in the prevalence of weekly heavy drinking among current drinkers aged 15+ in the NWT between 1996 and 2006 (refer to Table 7 in the Appendix for all demographic trends). The prevalence of weekly heavy drinking in the NWT changed little over the past 10 years[5]. By 2006, 14% of current drinkers aged 15+ were binge drinking at least once a week. For the population groups, only males and Aboriginals show any significant changes between 1996 and 2006. Weekly binge drinking declined from 23% to 18% among males and from 27% to 16% among Aboriginals[6].

FIGURE 3.5.3 Overall trend in the prevalence of heavy weekly drinking (5+ drinks) among current drinkers aged 15+, NWT 1996-2006

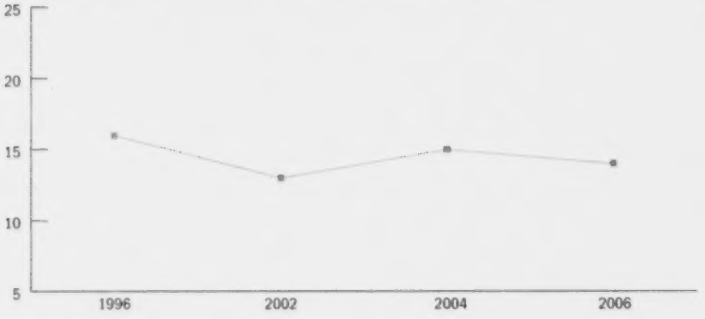
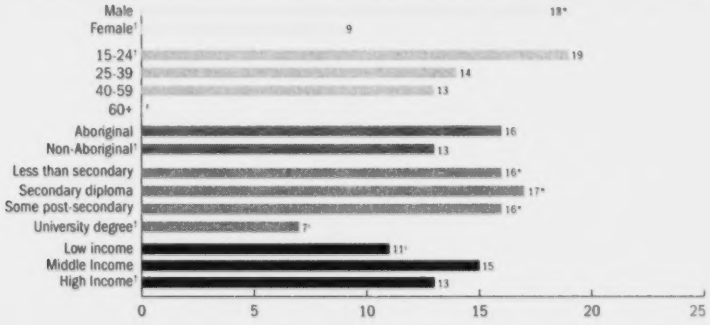


Figure 3.5.4 shows the group differences in the prevalence of weekly heavy drinking among current drinkers aged 15+ in the NWT (refer to Table 7 in the Appendix as a complement to Figure 3.5.4). For the most part, it appears that the prevalence of heavy weekly drinking cuts across age, ethnic and income boundaries. No significant differences exist within these groups as they do for the other indicators of alcohol use. However, the prevalence of weekly binge drinking does vary significantly by gender and education. Males have approximately double the prevalence of weekly binge drinking (18% vs. 9%). However, the gender gap in weekly binge drinking declined from 2.9 times to 2.0 times the likelihood over the past 10 years.

FIGURE 3.5.4 Group differences in heavy drinking at least once per week among current drinkers aged 15+, NWT 1996 - 2006



† These values don't seem to be affected as much by the modifications to the question in subsequent surveys, as described above with monthly drinking.

§ Although there is variability from survey to survey among the Aboriginal population (could be due to the different communities sampled in each survey), the prevalence of weekly binge drinking appears to have declined over the past 10 years.

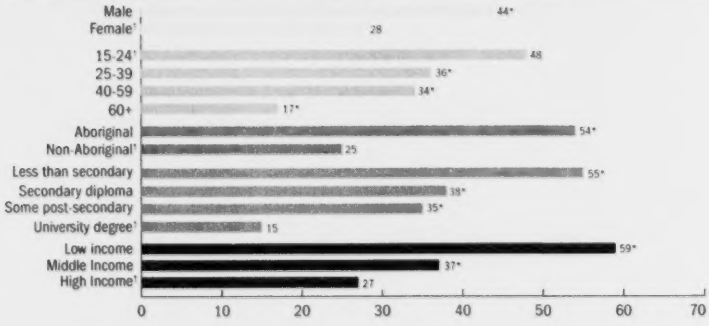
The Aboriginal and Non-Aboriginal drinking gap also narrowed a considerable degree, where the difference in prevalence declined from 2.4 times to around 1.2 times the likelihood between 1996 and 2006. By 2006, there was no significant difference between Aboriginals and Non-Aboriginals in the prevalence of weekly binge drinking. University graduates were less likely to drink heavily on a weekly basis than all other education groups. On average, respondents with less than secondary education, a secondary diploma and some post-secondary education were more than twice as likely as university graduates to consume 5+ drinks at least once per week (16%, 17% and 16% vs. 7%).

3.6 Harmful/Hazardous Drinking: Alcohol Use Disorder Identification Test (AUDIT)

The Alcohol Use Disorder Identification Test (AUDIT) helps identify hazardous drinking patterns and gives an indication of alcohol dependency. AUDIT is a derived variable based on ten questionnaire items, which includes drinking frequency; volume; inability to stop drinking after starting; failure to meet expectations because of drinking; need for alcohol in the morning to get going; feelings of guilt after drinking; inability to remember what happened the night before because of drinking; injury as a result of drinking; and having someone express concern about drinking. An AUDIT score of eight or more indicates a harmful/hazardous use of alcohol.

Figure 3.6.1 shows the group differences in the prevalence of scoring 8+ on AUDIT among current drinkers aged 15+ in the NWT (refer to Table 8 in the Appendix as a complement to Figure 3.6.1). By 2006, 37% of the NWT population aged 15+ scored eight or higher on AUDIT . This means that approximately one third of the NWT population engaged in high-risk alcohol use. The prevalence of harmful/hazardous drinking tends to decline with age. Residents aged 15 to 24 years were more likely than the older age groups to score 8+ on AUDIT (48% vs. 36%, 34% and 18%). Males were almost twice as likely as females to engage in harmful/hazardous drinking (44% vs. 28%). Similarly, Aboriginals were twice as likely as Non-Aboriginals to score 8+ on AUDIT (54% vs. 25%).

FIGURE 3.6.1 Group differences in harmful and hazardous drinking (an AUDIT score of 8+) among current drinkers aged 15+, NWT 2006

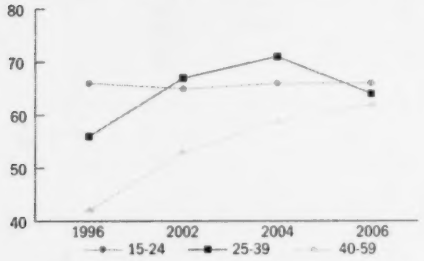


The harmful/hazardous use of alcohol also declines with the levels of education and income adequacy. University graduates were significantly less likely to score 8+ than all other education groups. Residents with less than secondary education were 3.7 times as likely and those with a secondary diploma or some post-secondary education were more than twice as likely as university graduates to engage in harmful/hazardous drinking (15% vs. 55%, 38% and 35%). Similarly, low income households were 2.2 times and middle income households were 1.4 times more likely than high income households to score 8+ on AUDIT (27% vs. 59% and 37%).

† Although there are some noticeable fluctuations in the AUDIT score between the 2004 and 2006 surveys, it is believed that much of the change may be due to sample selection methods. That is, a larger number of small northern communities were sampled in 2006 and it is likely some of these additional or previously non-sampled communities had lower rates of drinking. As can be seen by the proportions in Table 8 of the Appendix, the sampling variation has more of an affect on the rates of the Aboriginal population. Thus, changes probably reflect community differences.

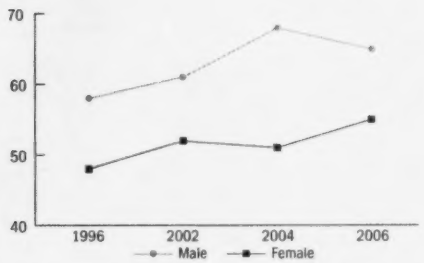
Lifetime cannabis use by a) age; b) sex; and c) ethnicity

a) age



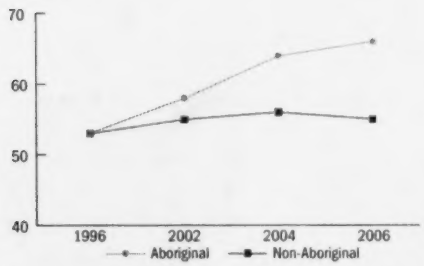
- For 15 to 24 year olds, lifetime cannabis use increased to 71% in 2004 and then declined to 64% by 2006. Lifetime use changed little among 25 to 39 year olds, but increased significantly among 40 to 59 year olds (42% to 62%).

b) sex



- Lifetime cannabis use increased significantly among both males (58% to 65%) and females (48% to 55%) over the past 10 years.

c) ethnicity



- Lifetime cannabis use increased significantly among Aboriginals (53% to 66%), while lifetime use changed little among Non-Aboriginals over the past 10 years.

4. Illicit Drugs

In this section, trends of cannabis and other illicit drug use in the NWT are examined. Drug use is probably the most difficult of the addictive substances to measure accurately because it is an illegal and socially unacceptable activity. In a survey situation, addicts may be less likely to participate or be sampled, some respondents may be unwilling to report drug use and others may have a tendency to provide socially acceptable answers by concealing or exaggerating their behaviour. Given the sensitive nature of the topic, estimates of prevalence in the population may be under or over reported.

4.1 Cannabis: Lifetime use

Respondents were asked whether they had tried cannabis at least once in their lifetime. Figure 4.1.1 shows the overall trend in lifetime cannabis use among NWT residents aged 15+ between 1996 and 2006 (refer to Table 9 in the Appendix for all demographic trends). Overall, the majority of the NWT population aged 15+ reported using cannabis at least once. The proportion of lifetime users increased from 53% to 60% between 1996 and 2006. For 15 to 24 year olds, lifetime use increased from 56% in 1996 to 71% in 2004 and then declined to 64% by 2006. The downward trend was not significant between 2004 and 2006. Lifetime use remained stable for 25 to 39 year olds at around 66%, but increased among 40 to 59 year olds (42% to 62%). The proportion of lifetime users increased significantly among both males (58% to 65%) and females (48% to 55%). For Aboriginals, lifetime use increased from 53% to 66%, while there was minimal change among Non-Aboriginals over the past 10 years.

FIGURE 4.1.1 Overall trend in the prevalence of lifetime cannabis use among residents aged 15+, NWT 1996-2006

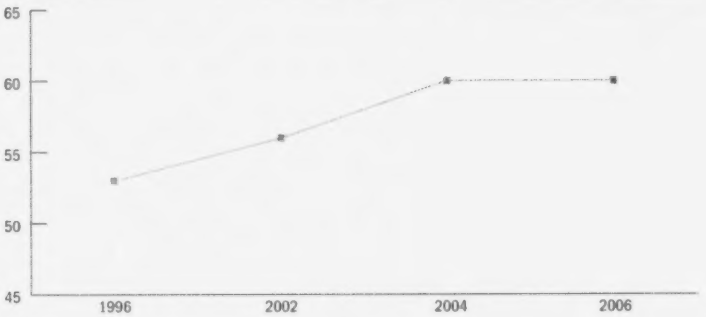
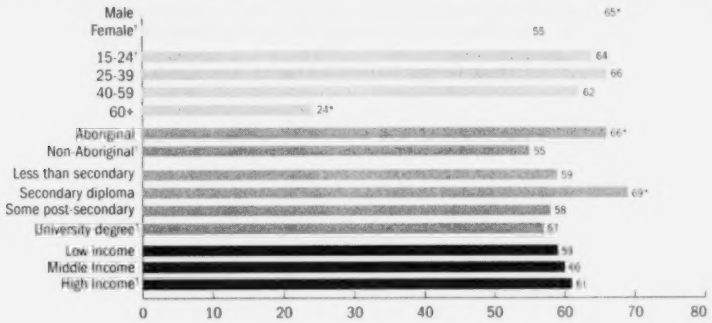


Figure 4.1.2 shows the group differences in lifetime cannabis use among NWT residents aged 15+ (refer to Table 9 in the Appendix as a complement to Figure 4.1.2). By 2006, only 60+ year olds had a significantly smaller proportion of lifetime users than the other age groups. On average, 15 to 59 year olds were nearly 3 times as likely as 60+ year olds to have used cannabis at least once (24% vs. 64%, 66%, and 62%). Males were more likely than females (65% vs. 55%) and Aboriginals were more likely than Non-Aboriginals to have used cannabis at least once (66% vs. 55%). Additionally, respondents with a secondary school diploma had a significantly higher proportion of lifetime users than the other education groups (69 vs. 59%, 58% and 57%). Lifetime use did not vary significantly by income adequacy.

FIGURE 4.1.2 Group differences in the lifetime prevalence of cannabis use among residents aged 15+, NWT 2006



4.2 Cannabis: Past year use

Respondents were asked if they used cannabis within 12 months prior to the survey. Figure 4.2.3 shows the overall trend in the prevalence of past year cannabis use among NWT residents aged 15+ between 1996 and 2006 (refer to Table 10 in the Appendix for all demographic trends). Since 2002, the prevalence of past year use has been stable at around 20% of the NWT population. Similarly, much of the increase among the demographic indicators took place between 1996 and 2002. For 15 to 24 year olds, past year use increased significantly from 29% in 1996 to 46% in 2004 and then declined to 36% by 2006. However, the decline was not significant between 2004 and 2006[8]. The annual prevalence increased from 5% to 13% among 40 to 59 year olds and appears to be on an upward trend among 25 to 39 year olds, but the change was not significant. Past year use increased from 20% to 26% among males, while for females, the proportion rose from 11% in 1996 to 16% in 2002 and then declined slightly to 13% by 2006. The decline was not significant between 2004 and 2006. For Aboriginals, the prevalence of past year use increased from 23% in 1996 to 30% in 2002 and since then appears to be on a declining trend[9].

FIGURE 4.2.1 Overall trend in the prevalence of past year cannabis use among residents aged 15+, NWT 1996-2006

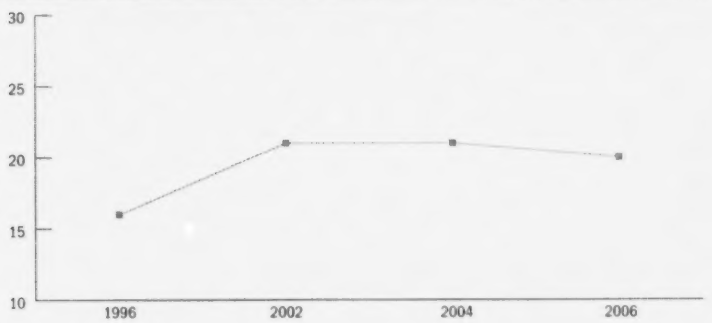
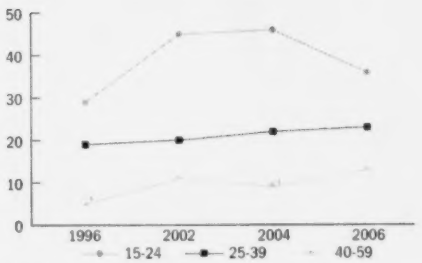


Figure 4.2.2 shows the group differences in the prevalence of past year cannabis use among NWT residents aged 15+ (refer to Table 10 in the Appendix as a complement to Figure 4.2.2). The prevalence of past year use tends to decline with age. As such, 15 to 24 year olds were 1.6 times more likely than those aged 25 to 39 and 2.8 times more likely than those aged 40 to 59 to have used cannabis in the past year (36% vs. 23% and 13%). Past year use also varies,

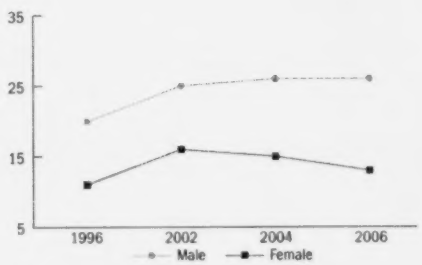
Prevalence of cannabis use in the past year by a) age; b) sex; and c) ethnicity

a) age



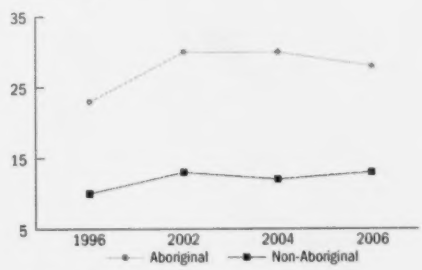
* Only 40 to 59 year olds had a significant increase in past year cannabis use (5% to 13%). Since 2004, past year cannabis use has been on a downward trend among 15 to 24 year olds, while there was little change among 25 to 39 year olds.

b) sex



* Past year cannabis use increased significantly among males (20% to 26%) over the past 10 years. Although not statistically significant, female prevalence has been on a downward trend since 2002.

c) ethnicity



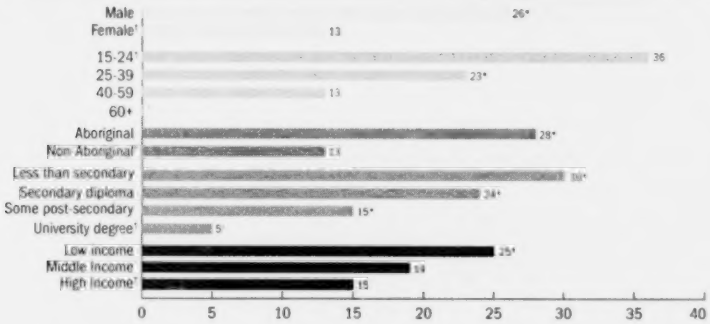
* For Aboriginals, past year cannabis use increased to 30% in 2002 and then declined slightly to 27% by 2006. Non-Aboriginal prevalence has changed little over the past 10 years.

[8] This age group is more subject to random variation since it is based on a smaller number of respondents, as compared to 25 to 39, 40 to 59 year olds. Many young adults are away at post-secondary institutions in other provinces at the time of the surveys.

[9] Future surveys will help to determine whether the observed downward trends among some of the population groups are the result of behavioural changes in the population.

significantly by gender and ethnicity. Males were twice as likely as females (26% vs. 13%) and Aboriginals were twice as likely as Non-Aboriginals to have used cannabis in the past year (28% vs. 13%). University graduates were much less likely than all other education groups to have used cannabis. Those with less than secondary schooling had a 6.0 times higher prevalence, respondents with a secondary diploma had a 4.8 times higher one and those with some post secondary education had a 3.0 times greater likelihood than university graduates (5% vs. 30%, 24% and 15%). Additionally, low income households were almost twice as likely as high income households to have used cannabis in the past year (25% vs. 15%).

FIGURE 4.2.2 Group differences in the prevalence of past year cannabis use among residents aged 15+, NWT 2006



In the 2004 and 2006 surveys, past year users were asked how often they used cannabis within 3 months prior to the survey. Table 4.2.1 shows the frequency of cannabis use among past year users aged 15+ between 2004 and 2006. The differences in weekly and monthly use between 2004 and 2006 are probably the result of sampling variation[1]. By 2006, 87% of past year users reported using cannabis within 3 months prior to the survey. Additionally, 49% of past year users reported using cannabis at least once a week, while 38% used cannabis monthly or less. This means that at least 10% of NWT population aged 15+ was using cannabis on a regular or weekly basis.

TABLE 4.2.1 Frequency of cannabis use in the past 3 months among past year cannabis users aged 15+, NWT 2004 and 2006

Frequency	Past Year Users		Population aged 15+	
	2004	2006	2004	2006
Total	86	87	17	18
Weekly or more	39	49	8	10
Monthly or less	47	38	9	8
Never	14[E]	13[E]	83	83

[E] Moderate sampling variability - interpret with caution.

[1] Given the fluctuations from survey to survey, the trend could be due more to sampling variation as a result of the small numbers on which the measure was based or the communities that were selected in the samples. Thus, these results should be interpreted with caution.

4.3 Other Illicit Drugs: Lifetime and past year use

NWT residents were asked whether they tried any of the following types of drugs at least once in their lifetime: cocaine/crack, hallucinogens, speed, ecstasy and heroin[11]. Figure 4.3.1 shows the overall trends in lifetime and past year use of any of the five types of illicit drugs among NWT residents aged 15+ between 1996 and 2006 (refer to Table 11 in the Appendix for all demographic trends). The lifetime use of any of the five types of illicit drugs has been stable at around 17% of the population between 1996 and 2006. Additionally, lifetime use has been stable within all population groups. As such, no significant trends were observed over the past 10 years. Although not significant, the prevalence of past year use of any of the five illicit drugs increased from 2% to 4% between 1996 and 2006. For population group differences, lifetime use only varied significantly by gender. Males were more than twice as likely as females to have used other illicit substances at least once in their life (23% vs. 11%).

FIGURE 4.3.1 Lifetime and past year use of other illicit drugs among residents aged 15+, NWT 1996-2006

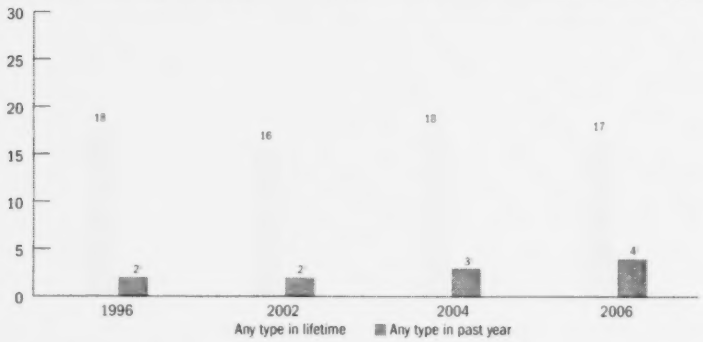


Table 4.3.1 shows the lifetime use by five types of other illicit drugs among NWT residents aged 15+ between 1996 and 2006 (refer to Table 12 in the Appendix for more detailed information). By 2006, the most common drugs used at least once were hallucinogens (12%), followed by cocaine/crack (11%), ecstasy (4%) and speed (3%). The newer 'designer' drug ecstasy appears to have surpassed the use of speed in the NWT. Otherwise, the trends have remained quite stable over the past 10 years.

TABLE 4.3.1 Lifetime use of other illicit drugs among residents aged 15+, NWT 1996 – 2006

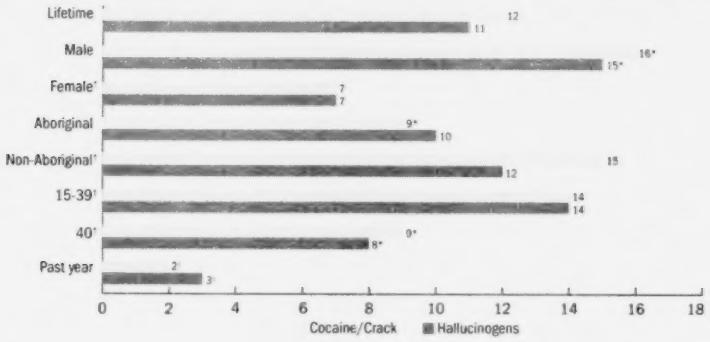
Type	1996	2002	2004	2006	Trend
Cocaine/Crack	10		12	11	ns
Hallucinogens	14		12	12	ns
Speed	6		3[E]	3	ns
Ecstasy			3[E]	4	
Heroin	1[E]		1[E]	[F]	

[E] Moderate sampling variability - interpret with caution.
[F] High sampling variability - data was suppressed.
.. Data not available.
* Significant difference at the .05 level; ns not significant. No significance test.

[11] *A cautionary note*: the prevalence of other illicit drug use can be much higher in the NWT, as not all types of illicit substances are included in all of the surveys.

Figure 4.3.2 shows select group differences in the lifetime use of cocaine/crack and hallucinogens among NWT residents aged 15+ between 1996 and 2006 (refer to Table 12 in the Appendix as a complement to Figure 4.3.2)[12]. To allow for comparisons by age, the age groups were collapsed into a high risk age group (15 to 39 years) and 40+ year olds. The high-risk age group was almost twice as likely as 40+ year olds to have used cocaine/crack (14% vs. 8%) and 1.5 times as likely to have tried hallucinogens (12% vs. 8%). Males were around twice as likely as females to have used cocaine/crack (15% vs. 7%) and hallucinogens at least once in their lifetime (16% vs. 7%). Further, Non-Aboriginals were almost twice as likely as Aboriginals to have used hallucinogens at least once (15% vs. 9%). Although the trend was not significant, the prevalence of past year cocaine/crack use increased from 1% in 1996 to 3% in 2006. In addition, it is estimated that 2% of the NWT population aged 15+ used either hallucinogens or ecstasy at least once in the past year.

FIGURE 4.3.2 Select group differences in the lifetime use of cocaine/crack and hallucinogens among residents aged 15+, NWT 2006



[12] Only the trends and group differences in the prevalence of the lifetime use of cocaine/crack and hallucinogens are examined further, as these estimates are more reliable than ones based on the other types of illicit substances.

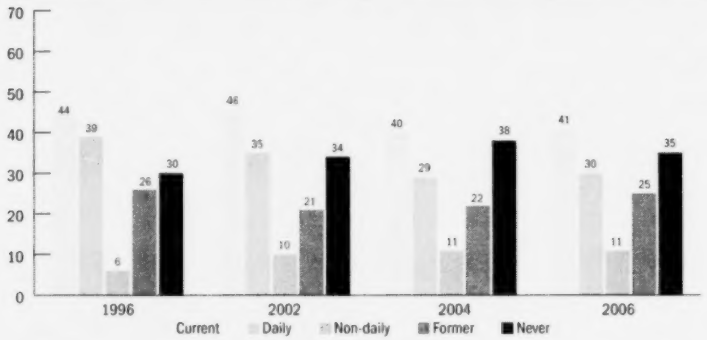
5. Tobacco

This section provides a general descriptive summary of tobacco trends in the NWT between 1996 and 2006. Generally, there are many indicators that can be used to measure tobacco trends. In this report, only the indicators that were included in all of the surveys are compared. A more detailed report on tobacco use patterns in the NWT will be produced in the future. Note that the 2004 NWT Addictions Survey excluded most tobacco content, with the exception of smoking status and the derivable indicator, quit rates. Thus, data used to estimate the average number of cigarettes per day, age started smoking and the use of chewing tobacco were extracted from the 2004 NTUMS Survey. Additionally, the 2004 estimates of smoking status and quit rates are presented as pooled proportions. These proportions are derived from combining the data from the 2004 NWT Addictions and 2004 NTUMS Surveys[1].

5.1 Smoking Status

Figure 5.1.1 shows the overall trends in the smoking status of NWT residents aged 15+ between 1996 and 2006 (refer to Table 13 in the Appendix for all demographic trends). In the NWT, the proportion of current smokers (i.e. both daily and occasional smokers) appears to be on a downward trend (from 44% to 41%), but the change was not significant. Most of the decline could be attributed to a significant decline in daily smoking (39% to 30%). However, a modest increase in occasional smoking (6% to 11%) offset the decline. In addition, the proportion of residents who never smoked increased from 30% to 35% over the past 10 years.

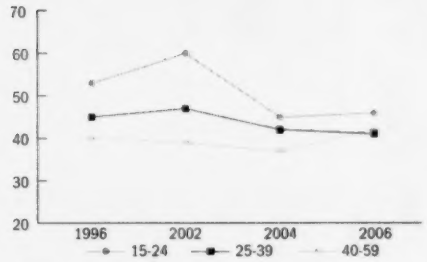
FIGURE 5.1.1 Smoking status in the past 12 months among residents aged 15+, NWT 1996 - 2006



For the population groups, only females (45% to 37%) and Aboriginals (63% to 54%) show significant declines in the prevalence of current smoking between 1996 and 2006. Since 2002, the proportion of current smokers has also declined significantly among 15 to 24 year olds (60% to 46%). Decreases in daily smoking accounted for most of the drop in current smoking among females (38% to 28%), Aboriginals (53% to 36%) and 15 to 24 year olds (45% to 31%). For Non-Aboriginals, the prevalence of both daily and current smoking are on a downward trend, but the changes were not statistically significant. Additionally, the proportion of current smokers is on a downward trend among 25 to 39 year olds and males, but these changes were also not significant. The declines in daily smoking among 25 to 39 year olds (40% to 30%) and males (39% to 32%) were offset by modest increases in the proportion of occasional smokers. Further, the proportion who never smoked increased significantly among 15 to 24 year olds (27% to 44%), females (30% to 40%) and Non-Aboriginals (41% to 47%) between 1996 and 2006.

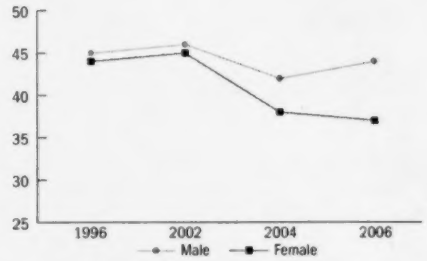
Prevalence of current smoking (i.e. daily and occasional smokers) by a) age; b) sex; and c) ethnicity

a) age



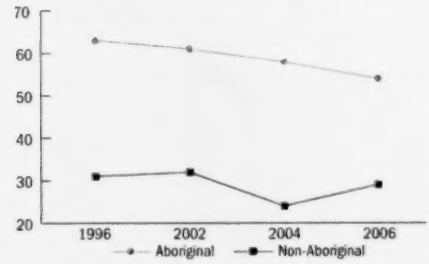
- Since 2002, the proportion of current smokers has declined significantly among 15 to 24 year olds (60% to 46%), while prevalence changed little among 25 to 39 and 40 to 59 year olds.

b) sex



- The prevalence of current smoking declined significantly among females (45% to 37%), while there was no significant change among males between 1996 and 2006.

c) ethnicity

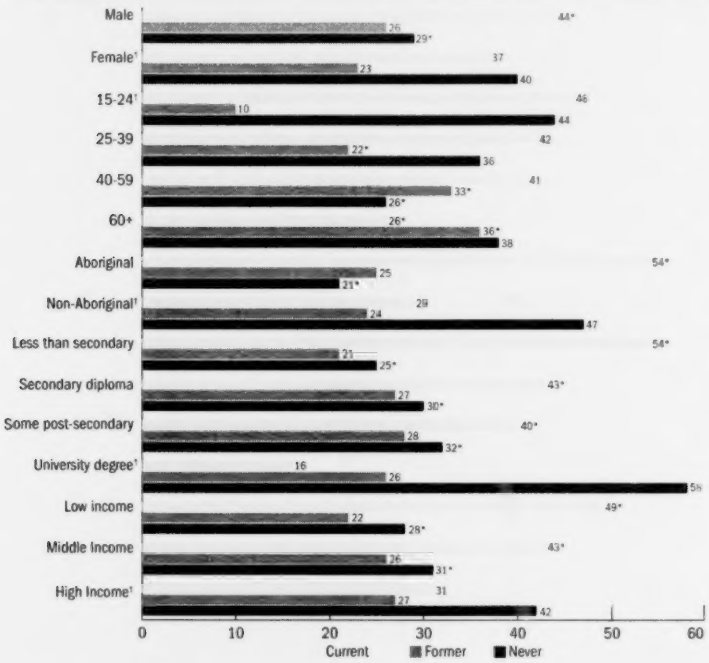


- The prevalence of current smoking declined significantly among Aboriginals (63% to 54%), while prevalence changed little among Non-Aboriginals.

[1] Since the standard errors of the two proportions are similar, a pooled proportion is used to provide a more reliable estimate. For example, in estimating the proportion of current smokers, the pooled proportion is calculated by taking the total number of current smokers from both 2004 surveys and dividing it by the total sample size of both those surveys.

Figure 5.1.2 shows the group differences in the smoking status of NWT residents aged 15+ (refer to Table 13 in the Appendix as a complement to Figure 5.1.2). Although the prevalence of current smoking tends to decline with age, only the difference between 15 to 24 and 60+ year olds was significant (46% vs. 26%). In contrast, the prevalence of former smoking tends to increase with age, where 25 to 39 year olds were 2.2 times as likely, 40 to 59 year olds were 3.3 times as likely and 60+ year olds were 3.6 times as likely as 15 to 24 year olds to be former smokers (22%, 33% and 36% vs. 10%). Males were slightly more likely than females to be current smokers (44% vs. 37%), while females were more likely to have never smoked (40% vs. 29%). Despite the significant declines in current smoking, Aboriginals were twice as likely as Non-Aboriginals to currently smoke (54% vs. 29%), while Non-Aboriginals were more than twice as likely to have never smoked (47% vs. 21%).

FIGURE 5.1.2 Group difference in smoking status among residents aged 15+, NWT 2006



The prevalence of smoking also tends to decline with the level of education and income adequacy. Residents with less than a secondary education were 3.4 times more likely, those with a secondary diploma were 2.7 times more likely and those with some post secondary education were 2.5 times more likely than university graduates to be current smokers (54%, 43% and 40% vs. 16%). In contrast, university graduates were twice as likely as the other education groups to have never smoked (58% vs. 25%, 30%, and 32%). Similarly, low and middle income households were more likely than high income households to currently smoke (49% and 43% vs. 31%), while high income households were more likely to have never smoked (42% vs. 28% and 31%). The prevalence of former smoking does not vary significantly by education or income adequacy.

5.2 Average number of cigarettes per day among daily smokers

Daily smokers were asked how many cigarettes they usually smoked per day. Figure 5.2.1 shows the overall trend in the average number of smokes per day among daily smokers aged 15+ between 1996 and 2006 (refer to Table 14 in the Appendix for all demographic trends). On average, daily smokers are consuming fewer cigarettes than they did 10 years ago. The average number of cigarettes smoked per day declined from 14 to 12 per day between

1996 and 2006. Average daily cigarette consumption declined significantly from 14 to 11 per day among 25 to 39 year olds and from 17 to 14 smokes per day among 40 to 59 year olds. No significant trends were found among 15 to 24 or 60+ year olds. Among males, daily consumption declined from 16 to 14 per day, while for females the daily number of cigarettes fell from 14 to 11 per day. Daily consumption appears to be on a downward trend for both Aboriginals and Non-Aboriginals, but the trends were not significant.

FIGURE 5.2.1 Overall trend in the average number of cigarettes per day among daily smokers aged 15+, NWT 1996 - 2006

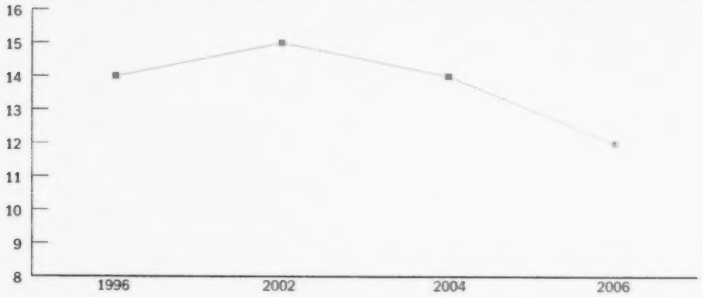
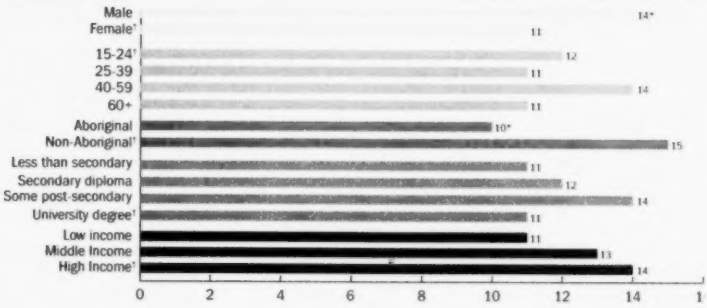


Figure 5.2.2 shows the group differences in the average number of cigarettes smoked per day among daily smokers aged 15+ (refer to Table 14 in the Appendix as a complement to Figure 5.2.2). Even though 40 to 59 year olds tend to smoke more per day than the other age groups, daily consumption does not vary significantly by age. However, the amount smoked per day does vary by gender and ethnicity. Males, on average, smoked 3 cigarettes more per day than females (14 vs. 11 per day) and Non-Aboriginals smoked 5 more per day than Aboriginals (15 vs. 10 per day). Average daily consumption did not vary significantly by education or income adequacy.

FIGURE 5.2.2 Group differences in the average number of cigarettes smoked per day among daily smokers aged 15+, NWT 2006



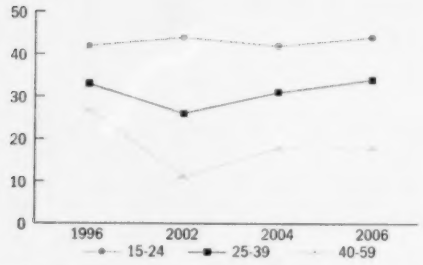
5.3 Quit Rates

Quit rates can be used to examine the success of quitting smoking within a population. The quit rate is the proportion of those who quit smoking among all those who have ever smoked cigarettes (i.e. current and former smokers). Figure 5.3.1 shows the overall trend in the quit rate among current and former smokers aged 15+ between 1996 and 2006 (refer to Table 15 in the Appendix for all demographic trends). Overall, the quit rate declined from 36% in 1996 to 31% in 2002 and then increased significantly to 38% by 2006[14]. For age, only the quit rate of 25 to 39 year olds increased significantly from 26% to 34% between 2002 and 2006. Although not statistically significant, quit rates among 15 to 24 and 60+ year olds follow the same general pattern. The female quit rate declined from 36% in 1996 to 30% in

[14] This trend could reflect the effects of sampling variability or actual social events taking place in the population at that time. To date, no viable explanation has been found for the decline in the quit rate between 1996 and 2002.

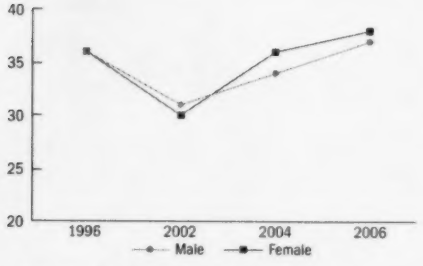
Quit rates among current and former smokers by a) age, b) sex and c) ethnicity

a) age



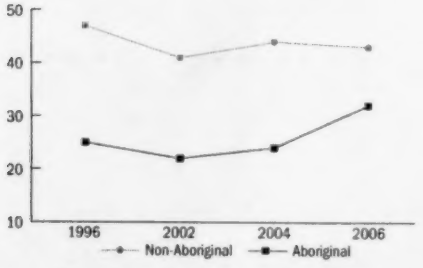
- The quit rate among 25 to 39 year olds (26% to 34%) increased significantly between 2002 and 2006. Although not significant, the quit rate among 15 to 24 year olds follows the same general pattern.

b) sex



- The female quit rate (30% to 38%) increased significantly between 2002 and 2006. Although not significant, the male quit rate follows the same general pattern.

c) ethnicity



- The Aboriginal quit rate (22% to 32%) increased significantly between 2002 and 2006, while there was no significant change in the Non-Aboriginal quit rate.

2002 and then increased 38% by 2006. The male quit rate follows the same pattern, but the change was not significant. Similarly, the Aboriginal quit rate declined from 25% in 1996 to 22% in 2002 and then increased significantly to 32% by 2006. There was no significant trend in the Non-Aboriginal quit rate.

FIGURE 5.3.1 Overall trend in the quit rate of 'ever smokers' aged 15+, NWT 1996 - 2006

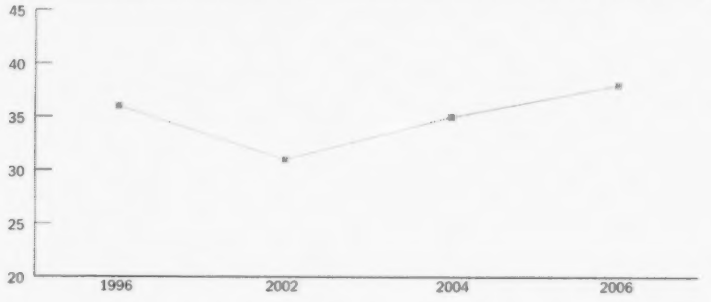
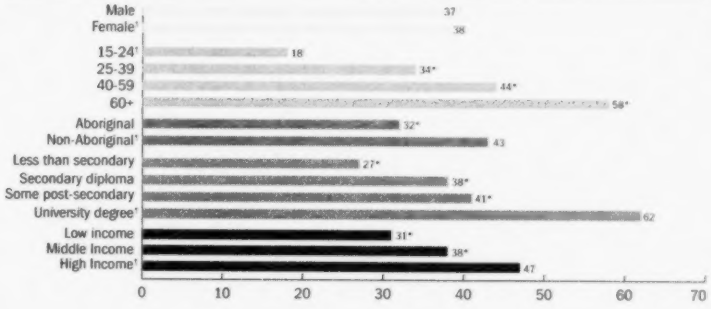


Figure 5.3.2 shows the group differences in quit rates among current and former smokers aged 15+ (refer to Table 15 in the Appendix as a complement to Figure 5.3.2). Quit rates tend to increase with age where 25 to 39 year olds were 1.9 times more likely, 40 to 59 year olds were 2.4 times more likely and 60+ year olds were 3.2 times more likely than 15 to 24 year olds to have successfully quit smoking (34%, 44%, and 58% vs. 18%). No significant gender difference was found in the rate of successful quitting. For ethnicity, Non-Aboriginals were more likely than Aboriginals to have successfully quit smoking (43% vs. 32%). However, the modest increase in the Aboriginal quit rate resulted in a narrowing of the quitting gap. The gap between Aboriginals and Non-Aboriginals declined from 1.9 times to 1.3 times the likelihood over the past 10 years.

FIGURE 5.3.2 Group differences in the quit rates among 'ever smokers' aged 15+, NWT 2006



Quit rates also tend to increase with the level of education and income adequacy. University graduates were 2.2 times as likely as those with less than secondary schooling, 1.6 times as likely as respondents with a secondary diploma and 1.5 times as likely as those with some post secondary education to have quit smoking (62% vs. 28%, 38% and 41%, respectively). The same pattern is observed with income, but the difference is not as pronounced. High income households were more likely than both low and middle income households to have quit smoking (47% vs. 31% and 38%).

5.4 Lifetime and past year chewing tobacco use

Respondents were asked whether they had used chewing tobacco at least once in their lifetime and in the past year. Figure 5.3.1 shows the overall trends in lifetime and past year chewing tobacco use among NWT residents aged 15+ between 1996 and 2006 (refer to Tables 16 and 17 in the Appendix for all demographic trends). Although not statistically significant, the lifetime use of chewing tobacco appears to be on an upward trend (16% to 19%). Conversely, the prevalence of past year use has remained stable at around 3% of the NWT population aged 15+. By 2006, about 16% of residents who used chewing tobacco at least once in their lifetime, did so, within 12 months prior to the survey. For Aboriginals, lifetime use declined from 27% to 22%, whereas it increased from 8% to 15% among Non-Aboriginals. Additionally, past year chewing tobacco use declined from 8% in 2002 to 4% by 2006 among Aboriginals.

FIGURE 5.4.1 Overall trends in lifetime and past year chewing tobacco use among NWT residents aged 15+, NWT 1996 - 2006

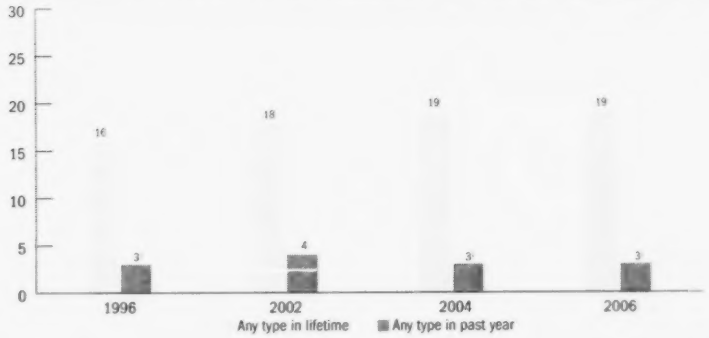
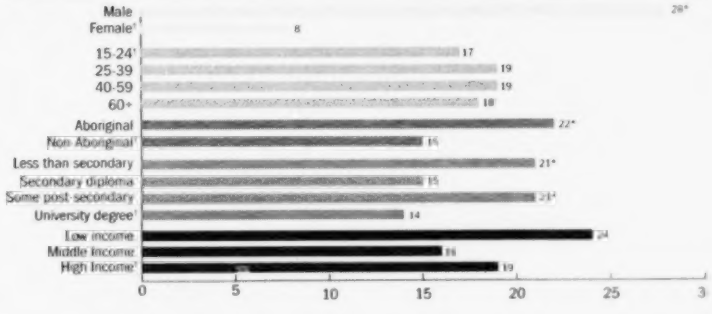


Figure 5.4.2 shows the group differences in lifetime chewing tobacco use among NWT residents aged 15+ (refer to Table 16 in the Appendix as a complement to Figure 5.3.2). Males were more than three times as likely as females (28% vs. 8%) and Aboriginals were more likely than Non-Aboriginals to have used chewing tobacco at least once (22% vs. 15%). Due to the increased proportion of lifetime users among Non-Aboriginals and the declining proportion among Aboriginals, the ethnicity gap in lifetime use has narrowed. The likelihood of Aboriginals using chewing tobacco declined from 3.5 to 1.5 times the rate of Non-Aboriginals over the past 10 years. Lifetime use also varies by education, where residents with less than secondary and some post secondary educations were more likely than university graduates to have used chewing tobacco at least once (21% and 21% vs. 14%). Lifetime use of chewing tobacco did not vary significantly by age or income adequacy.

FIGURE 5.4.2 Group differences in lifetime chewing tobacco use among NWT residents aged 15+, NWT 2006



6. Harm from alcohol, tobacco and drug use

This section provides a description of self-reported harm to oneself and to others as a result of alcohol, drug and tobacco use. Generally, the section examines harm from one's own drinking, harm from someone else's drinking, harm from own use of illicit drugs, drinking and driving, drinking during pregnancy and smoking during pregnancy.

6.1 Harm from own drinking in the past year

In the 2004 and 2006 NWT Addictions Surveys, current drinkers were asked if their own drinking had harmful effects on their friendships, physical health, home life, work/studies, financial, legal, housing and learning. Table 6.1.1 shows the types of harm from one's own drinking among current drinkers aged 15+ between 2004 and 2006. In 2006, about 21% of current drinkers aged 15+ reported at least one type of harm as a result of their own drinking. Harmful effects on friendships or social life (10%), physical health (10%) and home life or marriage (8%) were the most common types of self-reported harm in the past year.

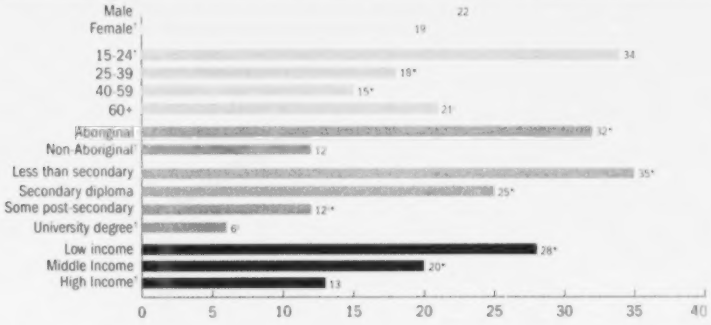
TABLE 6.1.1 Harm from own drinking among current drinkers aged 15+ by type, NWT 2004 and 2006

Type of harm	2004	2006
One or more types	22	21
Friendships/social life	13	10
Physical health	10	10
Home life/marriage	10	8
Work/studies	7	6
Financial position	8	5
Legal problems	2[F]	2[F]
Housing problems	[F]	2[F]
Learning problems	2[F]	2[F]

[F] Moderate sampling variability - interpret with caution.
[F] High sampling variability - data was suppressed.

Figure 6.1.1 shows group differences in the prevalence of experiencing one or more types of harm from one's own drinking among current drinkers aged 15+ (refer to Table 18 in the Appendix as a complement to Figure 6.1.1). The likelihood of harm tends to decline with age, where 15 to 24 year olds were twice as likely as 25 to 39 and 40 to 59 year olds to experience at least one type of harm (34% vs. 18% and 15%). Aboriginals were almost three times as likely as Non-Aboriginals to experience harm (32% vs. 12%). The likelihood of harm also tends to decrease with education and income adequacy. Respondents with less than a secondary education had 5.8 times the risk, those with a secondary diploma had 4.2 times the risk and those with some post secondary had 2.0 times the risk of university graduates (35%, 25% and 12% vs. 6%). Low income households had 2.2 times higher risk and middle income households had 1.5 times higher risk than high income households to experience harm as a result of their own drinking (28% and 20% vs. 13%).

FIGURE 6.1.1 Group differences in the prevalence of one or more types of harm from own drinking among current drinkers aged 15+, NWT 2006



6.2 Harm from someone else's drinking in the past year

Respondents were also asked if they experienced any of the following types of harm as a result of someone else's drinking: insults or humiliation, family or marriage problems, pushing and shoving, serious arguments, verbal abuse and physical assault. Table 6.2.1 shows the types of harm from someone else's drinking among NWT residents aged 15+ between 1996 and 2006. The prevalence of harm from someone else's drinking changed little over the past 10 years. By 2006, around 53% of the NWT population aged 15+ experienced at least one type of harm. The most common types of victimization were insults or humiliation (33%), verbal abuse (29%), serious arguments (29%) and pushing and shoving (25%). Moreover, 17% of respondents reported family or marriage problems and 10% had been physically assaulted by someone under the influence of alcohol. Only females experienced a significant decline in victimization from someone else's drinking. The prevalence declined from 56% to 49% between 1996 and 2006.

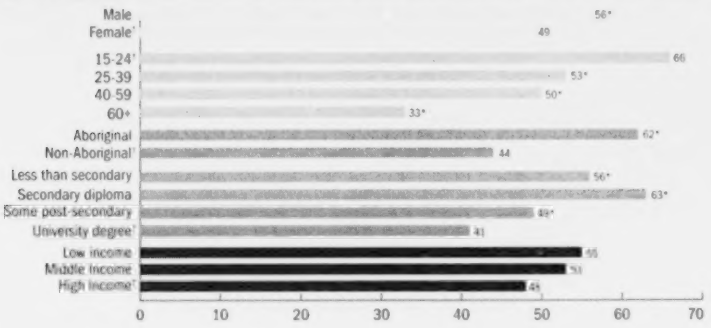
TABLE 6.2.1 Prevalence of harm from other people's drinking among residents aged 15+ by type, NWT 1996 - 2006

Type of harm	1996	2002	2004	2006
One or more types	55	53	56	53
Insulted/humiliated	40		35	33
Family/marriage problems	16	19	21	17
Pushed/shoved	25	26	27	25
Serious arguments	30	34	32	29
Verbal abuse		38	27	29
Physically assaulted	12	15	14	10

Data not available.

Figure 6.2.1 shows the group differences in the prevalence of experiencing one or more types of harm, as the result of someone else's drinking, among residents aged 15+ (refer to Table 19 in the Appendix as a complement to Figure 6.2.1). The prevalence of victimization tends to decline with age, where 15 to 24 year olds were significantly more likely than all other age groups to be victimized by someone who had been drinking (66% vs. 53%, 50% and 33%). Harm from someone else's drinking also differs by gender, ethnicity and education. Males were at a slightly higher risk than females of being victimized (56% vs. 49%) and Aboriginals were more likely than Non-Aboriginals to be harmed as a result of someone else's drinking (62% vs. 44%). University graduates were at a lower risk of victimization by someone who had been drinking than all other education groups (56%, 63% and 49% vs. 41%), while the prevalence of victimization did not vary significantly by income adequacy.

FIGURE 6.2.1 Group differences in the prevalence of one or more types of harm as the result of someone else's drinking among residents aged 15+, NWT 2006



6.3 Harm from the use of illicit drugs in the past year

Respondents who used drugs in the past year were asked the same set of harm-related questions, but in the context of harming oneself through the use of illicit drugs. Table 6.3.1 shows the prevalence of self-reported harm from illicit drug use among past year users aged 15+ between 1996 and 2006[16]. Overall, approximately 26% of past year drug users experienced at least one type of harm. The most common types reported were harm to home life or marriage (14%) followed by friendships or social life (12%), physical health (12%) work or study (8%) and learning (7%).

TABLE 6.3.1 Harm from illicit drug use among past year users aged 15+ by type, NWT 2004 and 2006

Type of Harm	2004			2006		
	Any Drug[1]	Other Illicit[2]	Cannabis	Any Drug[1]	Other Illicit[2]	Cannabis
Any type of harm	39	85[E]	32	26	53[E]	21
Friendships/ social life	17[E]	'	15[E]	12[E]	36[E]	7[E]
Physical health	21[E]	68[E]	13[E]	12[E]	28[E]	9[E]
Home life/ marriage	11[E]	'	9[E]	14[E]	32[E]	10[E]
Work/studies	12[E]	'	9[E]	8[E]	'	6[E]
Financial position	16[E]	'	13[E]	12[E]	24[E]	9[E]
Legal problems	'	'	'	'	'	'
Housing problems	'	'	'	'	'	'
Learning problems	'	'	'	7[E]	'	7[E]

[1] Includes Cannabis, Cocaine, Hallucinogens, Speed, Ecstasy & Heroin
[2] Includes Cocaine, Hallucinogens, Speed, Ecstasy & Heroin
[E] Moderate sampling variability - interpret with caution.
' High sampling variability - data was suppressed.

Approximately 21% of past year cannabis users reported at least one type of harm. The most common types of cannabis-related harm were home life or marriage (10%), physical health (9%), financial position (9%), friends or social life (7%), learning difficulties (7%) and work or study-related problems (6%). The majority (53%) of other illicit drug users experienced at least one type of harm in the past year. Harm to friendships or social life (36%), home life or marriage (32%), physical health (28%) and financial position (24%) were the most common types experienced by other illicit drug users.

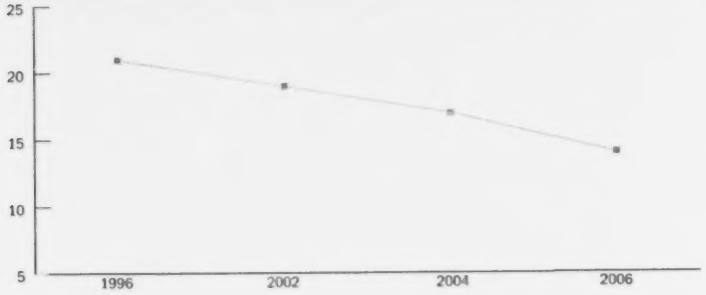
[16] The large fluctuations between 2004 and 2006 are probably largely due to sampling variability as a consequence of the small numbers on which the measures are based. As a result, only the prevalence of self-reported harm in 2006 will be examined.

For comparative purposes, other illicit drug users were more than twice as likely as both cannabis and alcohol users to experience at least one type of harm (53% vs. 21% and 21%). As compared to cannabis users, other illicit drug users were 5.1 times more likely to harm their friendships (36% vs. 7%) and three times more likely to harm their home life or marriage (32% vs. 10%), physical health (28% vs. 9%) and financial position (24% vs. 9%). In comparison to current drinkers, illicit drug users were 4.8 times more likely to harm their finances (24% vs. 5%), 4.0 times more likely to harm their home life or marriage (32% vs. 8%), 3.6 times more likely to harm friends or social life (36% vs. 10%) and 2.8 times more likely to harm their physical health (28% vs. 10%). No significant differences were found between cannabis and alcohol users in the prevalence of self-reported harm.

6.4 Drinking and driving

Drinking and driving increases the risk of bodily harm to self and to others. For instance, alcohol was a factor in 22% of all injuries and 55% of all deaths resulting from motor vehicle accidents between 1996 and 2004. Youth and young adults were especially at risk and accounted for about a third of all motor vehicle accident related deaths over that period[15].

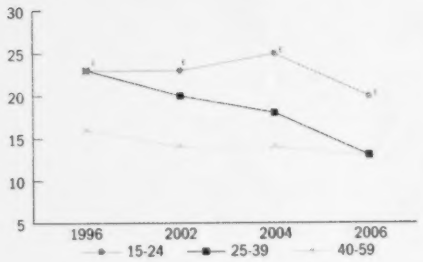
FIGURE 6.4.1 Overall trend in the prevalence of self-reported driving within an hour of consuming 2+ drinks among current drinkers aged 15+, NWT 1996 – 2006



Current drinkers were asked if they drove a motor vehicle within 1 hour of consuming 2+ alcoholic beverages within the year prior to the survey. Figure 6.4.1 shows the overall trend in the prevalence of driving within an hour of consuming 2+ drinks among current drinkers aged 15+ (refer to Table 20 in the Appendix for all demographic trends). Overall, the prevalence of self-reported drinking and driving declined from 21% to 14% between 1996 and 2006. For age, only 25 to 39 year olds experienced a significant decline, where the prevalence fell from 23% in 1996 to 13% by 2006. Drinking and driving declined from 29% to 18% among males, but there was no significant change among females. Aboriginal prevalence appeared to be on an upward trend between 1996 and 2004 and then declined significantly to 19% by 2006. For Non-Aboriginals, self-reported drinking and driving declined from 19% to 10% over the past 10 years.

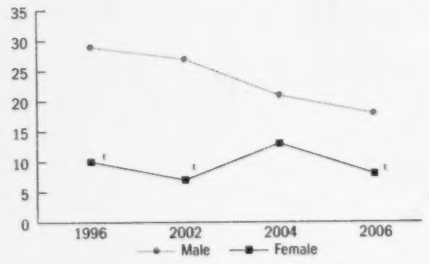
Prevalence of driving within 1 hour of consuming 2+ drinks by a) age; b) sex; and c) ethnicity

a) age



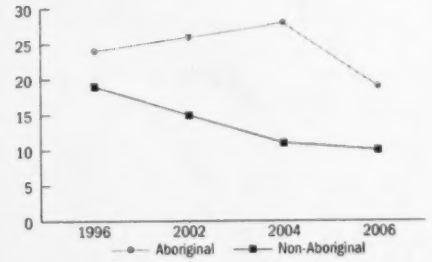
- All age groups show declines in the prevalence of self-reported drinking and driving, but only the decline among 25 to 39 year olds (23% to 13%) was statistcally significant.

b) sex



- Self-reported drinking and driving declined significantly among males (29% to 18%), while female prevalence changed little over the past 10 years.

c) ethnicity



- For Aboriginals, drinking and driving increased to 28% in 2004 and then declined significantly to 19% by 2006. Drinking and driving also declined significantly among Non-Aboriginals (19% to 10%).

[15] GNWT Department of Health and Social Services. 2004. Injury in the Northwest Territories: A Descriptive Report, pp. 42-50.

FIGURE 6.4.2 Group differences in the prevalence of driving within 1 hour of consuming 2+ drinks among current drinkers aged 15+, NWT 2006

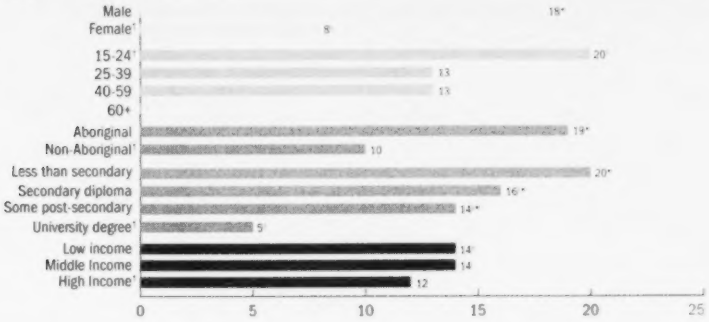


Figure 6.4.2 shows the group differences in the prevalence of drinking and driving among current drinkers aged 15+ (refer to Table 20 in the Appendix as a complement to Figure 6.4.2). Although the prevalence of drinking and driving tends to decline with age, no significant age differences were found. Despite the downward trend in male prevalence, males were still more than twice as likely as females to drive within an hour of consuming 2+ beverages (18% vs. 8%). Similarly, Aboriginals were about twice as likely as Non-Aboriginals to drink and drive (19% vs. 10%). Drinking and driving tends to decline with the increasing level of education. Residents with less than a secondary education were 4.0 times more likely, those with a secondary diploma were 3.2 more likely and those with some post secondary were 2.8 times as likely as university graduates to drink and drive within an hour of consuming 2+ beverages (20%, 16%, 14% vs. 5%). Drinking and driving did not vary significantly by income adequacy.

6.5 Drinking during pregnancy

Women who drink during pregnancy are at risk of having a child with FASD. Fetal Alcohol Spectrum Disorder (FASD) is a broad term describing a range of effects that can occur in an individual whose mother drank alcohol during pregnancy. These effects may include permanent physical, mental, behavioural and learning disabilities. Drinking patterns among women of childbearing age is one of the main risk factors associated with FASD. Thus, information on drinking during pregnancy provides an indication of the proportion of pregnant women who are at a high risk of having a child with FASD.

Women aged 20 to 44 years were asked whether *they drank alcohol during their last pregnancy* (i.e. pregnant within 5 years of the survey) and if yes, *how often* and *how much*. Table 6.5.1 shows the prevalence of drinking during pregnancy among women aged 20 to 44 years by frequency and volume between 1996 and 2006. Although the following changes were not significant, a few notable trends have occurred over the past 10 years. The percentage of women aged 20 to 44 who reported drinking during their last pregnancy increased from 11% in 1996 to 15% in 2002 and has remained stable since. Among the women who reported drinking during their last pregnancy, the percentage of those who drank at least once per week appears to have doubled from 16% in 2002 to 34% in 2006[17]. However, the large change is probably due to sampling variation, as some categories of the indicators are based on a small number of respondents. Thus, to give a more stable estimate of the population value, pooled estimates are also shown[18].

[17] Note that these proportions have moderate sampling variability and should be interpreted with caution. Due to the small number of cases on which these estimates are based, proportions from survey to survey can vary considerably by chance alone.

[18] The pooled estimate combines respondents from each survey and gives a more reliable estimate of the population parameter.

TABLE 6.5.1 Prevalence of drinking during pregnancy among women aged 20 to 44 years, NWT 1996 - 2006

Indicator	1996	2002	2006	Pooled[1]
Total	11	15	15[E]	n/a
once a week or more	[D]	16[E]	34[E]	15[E]
1 to 3 times a month	39[E]	21[E]	[D]	26
less than once a month	57	62	53[E]	59
1 or 2 Drinks	65	67	83	69
3 or 4 Drinks	25[E]	17[E]	[D]	19
5+ Drinks	[D]	17[E]	[D]	13[E]

[E] Moderate sampling variability - interpret with caution.
[D] High sampling variability - data was suppressed.
[1] Pooled proportion combines numbers from 2002 and 2006 to provide a more stable estimate.

Over the past 10 years, 15% of women who drank during their pregnancy, did so once a week or more. 26% drank 1 to 3 times per month, while 59% drank less than monthly. Although not statistically significant, the proportion of pregnant women who consumed one or two drinks increased from 65% in 1996 to 83% in 2006. This trend may indicate that women who drank during their pregnancy were on average drinking lower amounts of alcohol over time. For the pooled estimates, 69% of pregnant women who drank normally consumed 1 or 2 drinks, 19% consumed 3 or 4 drinks and approximately 13% consumed 5 or more drinks on a single occasion.

6.6 Smoking during pregnancy

Pregnant women who smoke expose the fetus to nicotine, carbon monoxide and other chemicals. Smoking during pregnancy increases the women's risk of placental problems (e.g. placenta previa) and of miscarriages. On average, infants of women who smoked or were exposed to second-hand tobacco smoke during pregnancy have a lower birth weight than infants of non-smoking parents. In turn, low birth weight infants are more susceptible to infections, other health problems and are more likely to die from complications.

TABLE 6.6.1 Smoking during pregnancy among women aged 20 to 44 years, NWT 1996-2006

Demographics	1996	2002	2004	2006	Trend
20 to 44 year olds	59	51	21[E]	10[E]	*
Spouse or Partner		48	16[E]	12[E]	*
Aboriginal	70	53	24[E]	13[E]	*
Non-Aboriginal	49	46	[D]	[D]	[D]

[E] Moderate sampling variability - interpret with caution.
[D] High sampling variability - data was suppressed.
[..] Data not available.
* Significant difference at the .05 level.

Women aged 20 to 44 years were asked whether they smoked daily or almost daily during their last pregnancy. Table 6.6.1 shows the prevalence of smoking during pregnancy among women aged 20 to 44 years between 1996 and 2006. Overall, the prevalence of smoking during pregnancy declined significantly from 59% in 1996 to 10% by 2006. Similarly, the percentage of spouses or partners that smoked around a pregnant woman declined from 48% in 2002 to 12% by 2006. Both Aboriginal and Non-Aboriginal women experienced declines over the past 10 years. For Aboriginal women, the prevalence of smoking during pregnancy declined from 70% to 13%. A problem with these trends is that it is difficult to determine how much of the change is attributable to behavioural changes and how much relates to the modification of questionnaire items. A large portion of the change could be due to the modifications made to the wording of questionnaire items[1*]. Regardless, it is believed that a significant portion of decline is the result of changes in smoking behaviour during pregnancy. This trend is most evident in the declines occurring between 2004 and 2006.

[1*] There are a couple of key factors that lead to the ambiguity. First, the questions are worded differently in the 1996 and 2002 NWT Alcohol and Drug Surveys. Those surveys asked respondents if they 'ever smoked during their last pregnancy' whereas, the 2004 NTUMS and 2006 NWT Addictions Survey asked respondents if they or their spouse/partner smoked 'regularly' while pregnant within the last 5 years. As a result, the 2004 and 2006 surveys are more restrictive in who is included as being pregnant (i.e. must have been pregnant within the past 5 years) and who constitutes a 'regular' smoker (i.e. must smoke 'daily or almost daily'). In contrast, the wording of the question in the 1996 and 2002 surveys do not contain a time or smoking constraint. Thus, a large portion of the change may be the result of modifications to the questions between surveys.

7. Gambling

Gambling is a broad concept generally defined as the betting of money or anything of value on diverse activities, undertaken in a wide variety of settings. People gamble because they enjoy these activities and may obtain benefits from them. For most individuals, gambling can be a positive experience. However, for the minority, gambling is associated with problems of varying degree and duration. As a potentially addictive behaviour, it is important to monitor gambling patterns in the NWT. In this section, general trends of gambling in the NWT are examined between 1996 and 2006. The 2004 NWT Addictions Survey did not include any gambling-related questions and is therefore not included in this chapter.

7.1 Current gambling

Residents were asked if they gambled for 'money or other things of value' in at least one activity during the past year. Figure 7.1.1 shows the overall trend in the prevalence of gambling among residents aged 15+ (refer to Table 21 in the Appendix for all demographic trends). The vast majority of NWT residents reported gambling in at least one activity during the past year. However, the prevalence of current gambling declined from 78% to 72% between 1996 and 2006. For gender, the prevalence declined from 81% to 73% among males and from 76% to 71% among females. Gambling also declined for both Aboriginals and Non-Aboriginals, where the prevalence fell from 84% to 76% among Aboriginals and from 75% to 68% among Non-Aboriginals.

FIGURE 7.1.1 Overall trend in the prevalence of current gambling among residents aged 15+, NWT 1996 - 2006

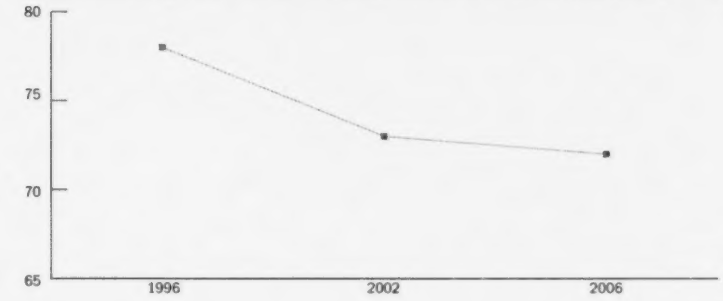
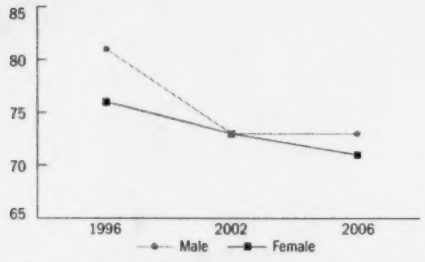


Figure 7.1.2 shows the group differences in the prevalence of current gambling among residents aged 15+ (refer to Table 21 in the Appendix as a complement to Figure 7.1.2). The prevalence of gambling within the past year does not vary significantly by age, gender or income adequacy. Although both ethnic groups experienced declines in gambling over time, Aboriginals were slightly more likely than Non-Aboriginals to have gambled in the past year (76% vs. 68%). Additionally, all education groups were significantly more likely than university graduates to have gambled in the past year (72%, 74% and 76% vs. 63%).

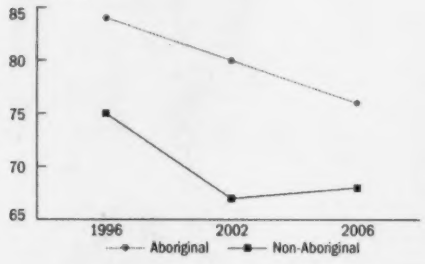
Prevalence of gambling at any activity within the past year by a) sex; and b) ethnicity

a) sex



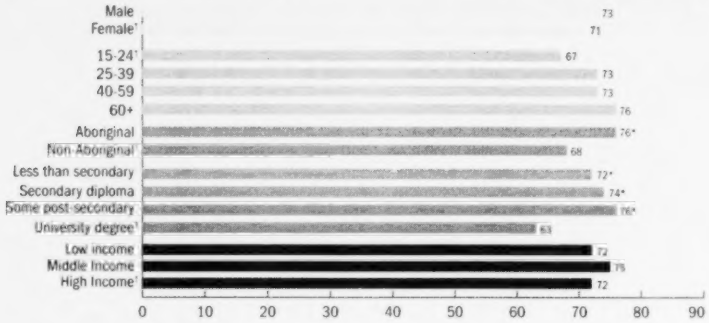
- The prevalence of gambling at any activity within the prior to the survey declined significantly among both males (81% to 73%) and females (76% to 71%) between 1996 and 2006.

b) ethnicity



- The prevalence of gambling at any activity within the year prior to the survey declined among both Aboriginals (84% to 76%) and Non-Aboriginals (75% to 68%) over the past 10 years.

FIGURE 7.1.2 Group differences in the prevalence of current gambling among residents aged 15+, NWT 2006



7.2 Types of gambling in the past year

Current gamblers were asked how many and what types of gambling activities they participated in during the past year. Figure 7.2.1 shows the prevalence of multiple types of gambling among current gamblers aged 15+ (refer to Table 22 in the Appendix for all demographic trends). Prevalence in multiple types of gambling remained stable between 1996 and 2006. By 2006, approximately 69% of current gamblers reported gambling in 2 or more types of activities. For the population groups, only 15 to 24 year olds show any significant changes over time. The prevalence of gambling declined from 88% to 66% over the past 10 years. For group differences, prevalence only differed significantly between Aboriginals and Non-Aboriginals. Aboriginals were slightly more likely than Non-Aboriginals to have gambled at 2 or more activities in the past year (73% vs. 65%).

FIGURE 7.2.1 Multiple types of gambling in past year among current gamblers aged 15+, NWT 1996 - 2006

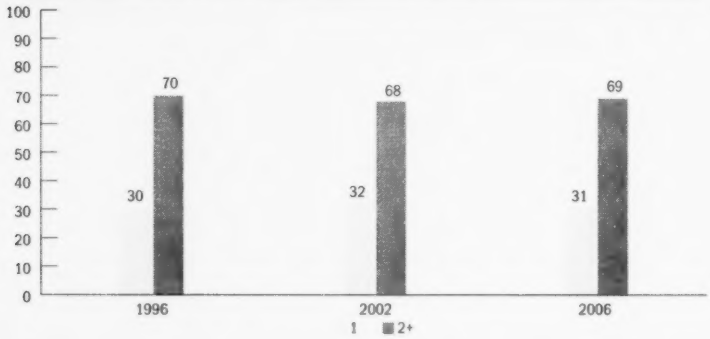


Table 7.2.1 shows the prevalence of past year gambling by type among residents aged 15+. The more traditional gambling activities such as, sports betting (30% to 10%), card games (53% to 32%) and billiards (18% to 7%) have been on a downward trend over the past 10 years. Other types such as, scratch/Nevada tickets (12% to 49%), slot machines (10% to 21%) and gambling at casinos (7% to 10%) have increased significantly. Playing bingo, purchasing lottery tickets and gambling on video lottery terminals show little change between 1996 and 2006.

The above trends indicate that certain forms of gambling have gained in popularity, while the popularity of others has diminished over time. In 1996, for instance, the lottery (66%), card games (53%), bingo (32%), sports events (30%) and pool (18%) were the most common types reported. By 2006, the most popular activities were the lottery (63%), scratch/Nevada tickets (49%), bingo (33%), card games (32%) and slot machines (21%). Internet gambling was introduced in the 2006 NWT Addictions Survey. Around 4% of the NWT population aged 15+ reported gambling on the Internet in the past year.

TABLE 7.2.1 Prevalence of gambling in the past year by type among current gamblers aged 15+, NWT 1996- 2006

Type	1996	2002	2006	Trend
Lottery tickets	66	57	63	ns
Scratch/Nevada tickets	12	46	49	*
Bingo	32	41	33	ns
Card games	53	27	32	*
Slot machines	10	18	21	*
Other types	10	6	14	
Video lottery terminals	12	12	11	ns
Sports events	30	14	10	*
Casino games	7	9	10	*
Pool/Billiards	18	12	7	*
Internet	..	..	4	

.. Data not available.
* Significant difference at the .05 level; ns not significant; No significance test.

Some types of gambling tend to vary by age, gender and ethnicity. Table 7.2.2 shows group differences in past year gambling by select types among current gamblers aged 15+ (refer to Table 24 in the Appendix to view all types of gambling). Current gamblers aged 15 to 59 were less likely than 60+ year olds to play bingo (29%, 33%, 30% vs. 51%), but more likely to purchase scratch/Nevada tickets (56%, 52% and 48% vs. 36%). All other age groups were more likely than 15 to 24 year olds to buy lottery tickets (66%, 78%, 58% vs. 33%), while 15 to 24 year olds were more likely to play cards (52% vs. 38%, 20% and 15%). Additionally, 15 to 24 year olds were less likely than 25 to 39 and 40 to 59 year olds to play the slot machines (14% vs. 26% and 21%).

TABLE 7.2.2 Group differences in the prevalence of gambling by select types among current gamblers aged 15+, NWT 2006

Type	Male	Female†	Aboriginal	Non-Aboriginal†	15-24†	25-39	40-59	60+
Bingo	24*	44	56*	9	29	33	30	51*
Scratch/ Nevada tickets	45*	55	56*	42	56	51	48	36*
Lottery tickets	67*	58	52*	74	33	66*	78*	58*
Card games	43*	20	33	31	52	38*	20*	15F*
Sports events	15*	5F	9	11	16F	9F*	10F*	!
Slot machines	19	22	23*	17	14F	26	21	16F
Casino games	15*	5F	11	9	13F	14	6F	!
Pool/ Billiards	11*	2F	7	6F	19F	4F	4F	!

F Moderate sampling variability - interpret with caution.
! High sampling variability - data was suppressed.
† Reference category- basis of comparison for the other categories.
* Significant difference at the .05 level.

Males were slightly more likely than females to purchase lottery tickets (67% vs. 58%), more than twice as likely to play card games (43% vs. 20%), 3.0 times more likely to bet money on sporting events and play at casinos (15% vs. 5%) and 5.5 times as likely to play pool/billiards (11% vs. 2%). In contrast, females were almost twice as likely as males to play bingo (44% vs. 24%) and more likely to buy scratch/Nevada tickets (55% vs. 45%). Aboriginals were 6.2 times as likely as Non-Aboriginals to have played bingo (56% vs. 9%), more likely to buy scratch/Nevada tickets (56% vs. 42%) and play the slot machines (23% vs. 17%). Conversely, Non-Aboriginals were more likely than Aboriginals to have purchased lottery tickets (74% vs. 52%).

7.3 Average money spent in a 'typical' week of gambling

Current gamblers were asked how much money, on average, they spent in a 'typical week on all gambling activities' during the past year. Figure 7.3.1 shows the overall trend in the average amount of money spent in a typical week of gambling among current gamblers aged 15+ (refer to Table 24 in the Appendix for all demographic trends). Overall, the average amount spent on gambling activities changed little between 1996 and 2006. In 2006, current gamblers were spending a weekly average of $44 on all gambling activities. For the population groups, only Non-Aboriginals show any significant changes over time. Money spent on a typical week of gambling declined from $33 to $24 over the past 10 years.

FIGURE 7.3.1 Overall trend in the average amount of money spent in a 'typical' week of gambling among current gamblers aged 15+, NWT 1996 - 2006

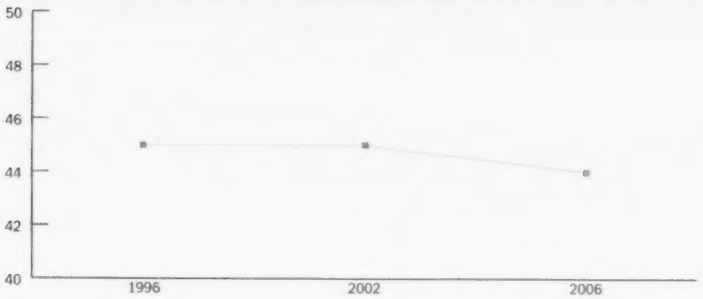
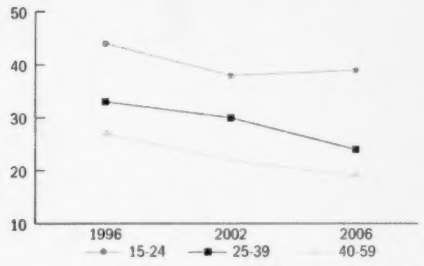


Figure 7.3.2 shows the group differences in the average amount of money spent on gambling in a 'typical' week among current gamblers aged 15+ (refer to Table 24 in the Appendix as a complement to Figure 7.3.2). The amount of money spent in a typical week did not vary significantly by age or gender. Despite the downward trend, Aboriginals spent around $38 more than Non-Aboriginals in a 'typical' week of gambling ($62 vs. $24). Weekly spending also tends to vary by the level of education. On average, university graduates spent less money on gambling than all other education groups. Current gamblers with less than a secondary education spent around $40 more and those with a secondary diploma or some post-secondary education spent around $23 more than university graduates ($62, $39 and $39 vs. $22). Additionally, spending tends to decline with income, but only the difference between low and high-income households was significant. Current gamblers from low-income households spent around $17 more than gamblers from high-income households ($55 vs. $38).

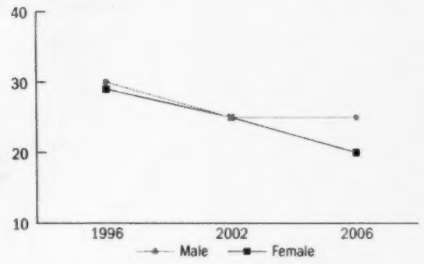
Prevalence of regular (or weekly) gambling at any of the 5 types by a) age; b) sex; and c) ethnicity

a) age



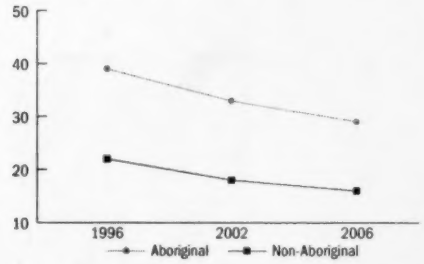
- The prevalence of regular gambling at any of the five activities has been on a downward trend among all age groups, but only the declines among 25 to 39 (27% to 19%) and 40 to 59 (33% to 24%) year olds were significant.

b) sex



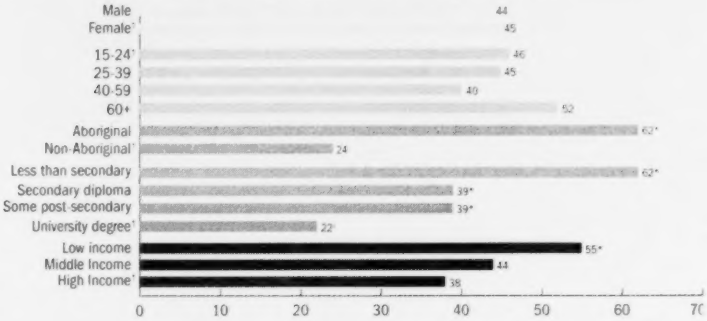
- The prevalence of regular gambling at any of the five activities declined significantly among females (30% to 20%), while the prevalence changed little among males over the past 10 years.

c) ethnicity



- The prevalence of regular gambling at any of the five activities declined significantly among Both Aboriginals (39% to 29%) and Non-Aboriginals (22% to 16%) between 1996 and 2006.

FIGURE 7.3.2 Group differences in the average amount of money spent in a 'typical' week of gambling among current gamblers aged 15+, NWT 2006



7.4 Regular Gambling

Regular gambling is defined as those individuals who reported gambling at least once per week. Past year gamblers were asked about the frequency of gambling in the following activities: playing bingo, purchase of lottery tickets, scratch/Nevada tickets, betting on sporting events and card games. *A Cautionary Note: the prevalence of regular gambling may be much higher in the NWT, as the frequency of gambling was not asked for all types of activities.*

FIGURE 7.4.1 Overall trend in the prevalence of regular gambling at any of the 5 types among residents aged 15+, NWT 1996 - 2006

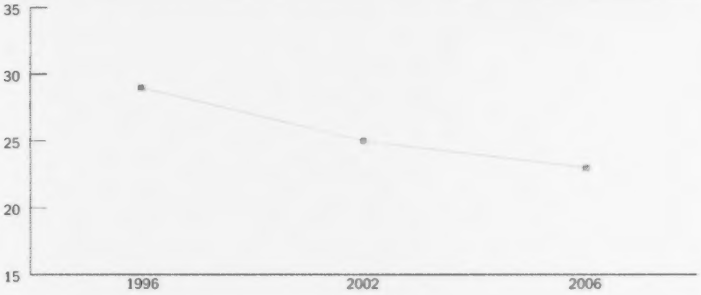


Figure 7.4.1 shows the overall trend in the prevalence of regular gambling among residents aged 15+ (refer to Table 25 in the Appendix for all demographic trends). Overall, the prevalence of regular gambling at any of the five activities fell from 29% to 23% between 1996 and 2006. The downward trend appears to have occurred among all age groups, but only the declines among 25 to 39 and 40 to 59 year olds were significant. Prevalence declined from 27% to 19% among 25 to 39 year olds and from 33% to 24% among 40 to 59 year olds. For females, the prevalence declined from 30% to 20%, while males show no significant change over the past 10 years. Both Aboriginals and Non-Aboriginals experienced significant declines. Regular gambling declined from 39% to 29% among Aboriginals and from 22% to 16% among Non-Aboriginals.

TABLE 7.4.1 Prevalence of regular gambling by type among residents aged 15+, NWT 1996 - 2006

Type	1996	2002	2006	Trend
Bingo	8	9	8	ns
Lottery Tickets	16	12	10	*
Scratch/Nevada tickets	2[F]	6	6	*
Card games	9	5	6	*
Sports events	6	3[F]	1[F]	*

[F] Moderate sampling variability - interpret with caution.
* Significant difference at the .05 level; ns not significant

Table 7.4.1 shows the overall trends in the prevalence of regular gambling by type among residents aged 15+. The regular purchase of scratch/Nevada tickets increased significantly from 2% to 6% to become the third most common type, while betting on sports events declined from 6% to 1% to become the least prevalent. The proportion of regular bingo players remained unchanged, while regular playing of the lottery (16% to 10%) and card games (9% to 6%) both declined. By 2006, playing the lottery regularly (10%) was the most prevalent followed by bingo (8%), scratch/Nevada tickets (6%), card games (6%) and betting on sports events (1%).

FIGURE 7.4.2 Group differences in the prevalence of regular gambling at any of the 5 types among residents aged 15+, NWT 2006

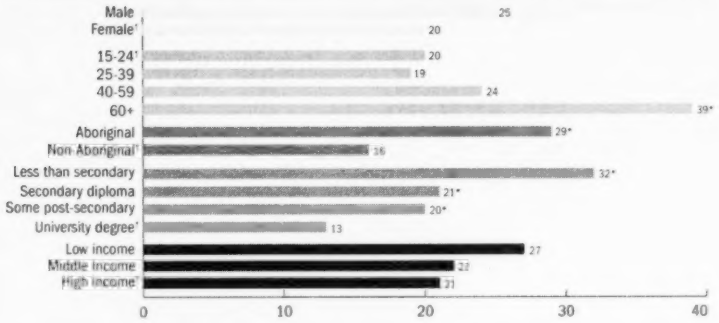


Figure 7.4.3 shows the group differences in the prevalence of regular gambling at any of the 5 types among NWT residents aged 15+ between 1996 and 2006 (refer to Table 25 in the Appendix as a complement to Figure 7.4.2). Seniors were significantly more likely than the rest of the population to gamble at least once per week. They were about twice as likely as 15 to 24 and 25 to 39 year olds and more likely than 40 to 59 year olds to gamble regularly (39% vs. 20%, 19% and 24%). Aboriginals were almost twice as likely as Non-Aboriginals to gamble at least once per week (29% vs. 16%). All education groups were significantly more likely than university graduates to gamble regularly. Respondents with a less than secondary education were 2.5 times as likely, those with a secondary diploma were 1.6 times more likely and ones with some post secondary were 1.5 times as likely as those with a university degree to gamble regularly (32%, 21% and 20% vs. 13%). Prevalence also tends to decline with income adequacy, but the differences were not significant.

Conclusion

Overall, the report shows a number of mixed findings. Between 1996 and 2006, some alcohol, drug, tobacco and gambling indicators have not changed, while others have been on an upward trend and others have been on a downward trend. A common pattern found throughout the report: younger residents, males, Aboriginals, those with lower levels of education and income adequacy were more likely to binge drink, use drugs and smoke cigarettes. Despite the declines in many of the indicators, there is still much room for improvement in the NWT, if levels are to approach those observed in the rest of Canada. Below is a summary of the main findings of the report.

The prevalence of current drinking remained constant at around 78% between 1996 and 2006. However, the prevalence of 'regular' heavy drinking (i.e. 5 or more drinks on a single occasion at least once a month) increased from 33% to 45%. Residents aged 15 to 59 years, males, females, Aboriginals and Non-Aboriginals all had significant increases in the prevalence of heavy/binge drinking. In 2006, approximately 37% of current drinkers had engaged in harmful/hazardous drinking. A common pattern that emerges for heavy and hazardous drinking: 15 to 24 year olds were more likely than all other age groups to engage in heavy or hazardous drinking. Males were more likely than females and Aboriginals were more likely than Non-Aboriginals to drink heavily and at hazardous levels. University graduates were less likely to drink heavily or hazardously than all other education groups, while high income households had a lower risk than both low and middle income households.

The majority of the NWT population reported using cannabis at least once in their lifetime. Overall, the proportion of lifetime users increased from 53% to 60% between 1996 and 2006. Since 2002, the prevalence of past year cannabis use has been stable at around 20% of the NWT population. In 2006, 49% of past year users reported using cannabis at least once a week. This means that at least 10% of NWT population aged 15 and over is using cannabis on a weekly basis. The lifetime use of any of the five types of other illicit drugs (i.e. cocaine/crack, hallucinogens, speed, ecstasy and heroin) remained stable at around 17% between 1996 and 2006. Although not significant, the prevalence of past year use of any of the five illicit drugs had increased from 2% to 4% between 1996 and 2006.

In the NWT, the proportion of current smokers (i.e. both daily and occasional smokers) appears to be on a downward trend (from 44% to 41%), but the change was not significant. Most of the decline could be attributed to a decline in daily smoking (39% to 30%). However, a modest increase in occasional smoking (6% to 11%) offset the decline. For the population groups, only females (45% to 37%) and Aboriginals (63% to 54%) show significant declines in the prevalence of current smoking between 1996 and 2006. Since 2002, the proportion of current smokers has declined significantly among 15 to 24 year olds (60% to 46%). Declines in daily smoking accounted for most of the decline in current smoking among females (38% to 28%), Aboriginals (53% to 36%) and 15 to 24 year olds (45% to 31%). Males were slightly more likely than females to smoke. Despite the significant declines in smoking, Aboriginals were almost twice as likely as Non-Aboriginals to smoke. University graduates were much less likely to smoke than all other education groups, while high income households had a lower prevalence than both low and middle income households.

In 2006, approximately 21% of current drinkers aged 15+ reported at least one type of harm as a result of their own drinking. Harmful effects on friendships or social life (10%), physical health (10%), and home life or marriage (8%) were the most common types reported in the year prior to the survey. Harm as a result of someone else's drinking changed little over the past 10 years. By 2006, about 53% of the NWT population aged 15+ experienced at least one type of harm. The most common types of victimization were insults or humiliation (33%), verbal abuse (29%), serious arguments (29%) and pushing and shoving (25%), family or marriage problems (17%) and physical assault (10%). Self-reported harm from one's own drinking tends to increase with age, where 15 to 24 year olds were at a greater risk of harm than the older age groups. Aboriginals were almost three times as likely as Non-Aboriginals to experience harm from their own drinking. University graduates had a much lower risk of harm than the other education groups, while high income households had a lower risk of harm than low and middle income households.

The vast majority of NWT residents aged 15+ reported gambling in at least one activity during the past year. However, the prevalence of current gambling declined from 78% to 72% between 1996 and 2006. Additionally, prevalence declined among males (81% to 73%) and females (76% to 71%) and both Aboriginals (84% to 76%) and Non-Aboriginals (75% to 68%). Regular gambling at any of the five activities (i.e. bingo, lottery tickets, scratch/Nevada tickets, sporting events and card games) declined from 29% to 23%. For the population groups, only the declines among Aboriginals (39% to 29%) and Non-Aboriginals (22% to 16%) were significant. By 2006, playing the lottery regularly (10%) was the most prevalent followed by bingo (8%), scratch/Nevada tickets (6%), card games (6%) and betting on sports events (1%). Seniors were significantly more likely than the rest of the population to gamble at least once per week. Aboriginals were almost twice as likely as Non-Aboriginals and all education groups were significantly more likely than university graduates to gamble regularly.

Appendix: Detailed Tables

TABLE 1.
SAMPLE SIZES OF EACH SURVEY AND THE CORRESPONDING WEIGHTED SAMPLES BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

Demographics	1996		2002		2004		NTUMS		2006	
	Weighted	Sample	Weighted	Sample	Weighted	Sample	Weighted	Sample	Weighted	Sample
Total	29,517	881	30,431	1,295	32,389	845	31,231	790	31,759	1,235
Male	14,968	408	15,892	595	16,841	380	15,988	363	16,539	571
Female	14,549	473	14,539	700	15,548	465	15,243	427	15,220	664
15-24	6,012	100	6,413	174	6,978	100	6,514	120	6,757	214
25-39	12,965	422	11,467	489	10,918	282	10,988	298	10,571	430
40-59	8,337	280	9,602	487	11,307	363	10,947	289	11,121	450
60+	2,203	79	2,743	137	2,993	94	2,781	83	3,258	138
Aboriginal	12,467	340	14,188	567	15,050	389	14,465	357	15,334	619
Non-Aboriginal	17,050	541	16,242	728	17,340	456	16,766	433	16,425	616
Less than secondary	10,333	268	11,384	446	11,515	276	8,779	204	10,854	425
Secondary diploma	5,389	153	6,147	252	6,473	158	7,741	202	6,471	254
Some post-secondary	7,970	258	7,125	325	7,121	200	8,078	206	8,319	298
University degree	5,305	186	5,456	259	7,232	209	6,113	163	6,064	257
Low income					4,920	134	7,246	174	4,576	193
Middle income					10,786	304	10,408	266	10,349	438
High income					9,872	258	8,047	211	11,354	390
Not stated					6,811	149	5,530	139	5,411	214

Data not available.

TABLE 2.
PROPORTION OF CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

Demographics	1996	2002	2004	2006	Trend
Total	79	78	78	78	ns
Male	80	81	81	84*	ns
Female†	77	76	75	71	*
15-24†	87	85	83	80	ns
25-39	84	84	84	87*	ns
40-59	71	74	75	76*	ns
60+	56	53	57	49*	ns
Aboriginal	70	71	70	69*	ns
Non-Aboriginal†	86	85	84	86	ns
Less than secondary	72	73	68	70*	ns
Secondary diploma	85	81	78	82*	ns
Some post-secondary	79	81	85	77*	ns
University degree†	85	84	86	88	ns
Low income			68	64*	
Middle income			79	74*	
High income†			87	85	
Not stated			70	80	

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; ' No significance test.

TABLE 3.
FREQUENCY OF DRINKING AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

Demographics	1996				2002				2004				2006				Trend			
	More than once a week	Once a week	1 to 3 times a month	Less than once a month	More than once a week	Once a week	1 to 3 times a month	Less than once a month	More than once a week	Once a week	1 to 3 times a month	Less than once a month	More than once a week	Once a week	1 to 3 times a month	Less than once a month	More than once a week	Once a week	1 to 3 times a month	Less than once a month
Total	25	19	27	29	26	18	30	26	20	20	35	25	29	17	33	22				
Male	36	22	24	17	34	22	30	15	28	22	31	18	35[*]	17	29	19				
Female	13	15	30	43	16	14	34	36	11	17	39	33	22	17	37	24				
15-24	27	12	26	35	17	20	41	22	18[*]	17[*]	40	25[*]	18	16	42	24				
25-39	24	23	26	27	25	18	30	27	18	24	38	19	28[*]	17	32[*]	22				
40-59	27	16	28	29	32	19	21	28	26	17	27	31	35[*]	17	30[*]	18				
60+	[E]	16[*]	[E]	[E]	27[*]	15	24	34	[E]	17[*]	40[*]	33[*]	38[*]	18[*]	16[*]	29				
Aboriginal	17	19	30	33	17	16	37	30	14	20	43	22	21[*]	17	38[*]	25[*]				
Non-Aboriginal[1]	30	18	25	27	32	20	24	24	25	19	29	28	36	17	29	19				
Less than secondary	15[*]	16	29	40	22	16	33	29	15[*]	15[*]	45	25	20[*]	10[**]	39	31[*]				
Secondary diploma	27	20[*]	29	24	23	21	26	29	16[*]	25	35	23	31	20	30	18				
Some post-secondary	29	16	26	29	28	17	32	23	23	19	24	33	36	20	28	16				
University degree[1]	35	23	21	21	34	22	23	22	27	22	31	20	32	18	32	17				
Low income	[E]	[E]	[E]	[E]	[E]	[E]	[E]	[E]	[E]	17[*]	44	28[*]	16[**]	11[*]	40[*]	33[*]				
Middle income	[E]	[E]	[E]	[E]	[E]	[E]	[E]	[E]	17	21	39	24	27[*]	17	33	23				
High income	[E]	[E]	[E]	[E]	[E]	[E]	[E]	[E]	28	21	29	22								
Not stated	[E]	[E]	[E]	[E]	[E]	[E]	[E]	[E]	19[*]	17[*]	33	31								

[*] Moderate sampling variability - interpret with caution.

[E] High sampling variability - data was suppressed.

[..] Data not available.

[1] Reference category - basis of comparison for the other categories.

[*] Significant difference at the .05 level. [**] not significant. No significance test.

TABLE 4.
USUAL NUMBER OF DRINKS ON A SINGLE OCCASION AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996			2002			2004			2006			Trend		
	1 or 2 drinks	3 or 4 drinks	5+ drinks	1 or 2 drinks	3 or 4 drinks	5+ drinks	1 or 2 drinks	3 or 4 drinks	5+ drinks	1 or 2 drinks	3 or 4 drinks	5+ drinks	1 or 2 drinks	3 or 4 drinks	5+ drinks
Total	42	24	34	40	26	35	41	19	40	42	23	35	ns	ns	ns
Male	33	24	43	33	26	42	36	16	49	36*	24	40*	ns	ns	ns
Female†	51	24	25	48	26	26	47	23	30	49	22	28	ns	ns	ns
15-24†	29	20	50	16f	32	52	21f	28f	52	25	24	51	ns	ns	ns
25-39	39	26	35	42	25	33	41	12f	47	40*	24	36*	ns	ns	ns
40-59	57	23	20	53	21	26	51	22	27	51*	23	26*	ns	ns	ns
60+	45	25	29	46	27f	27f	63	16f	21f	66*	17f	17f*	*	ns	ns
Aboriginal	17	23	61	19	24	57	18	20	62	27*	24	50*	*	ns	*
Non-Aboriginal†	56	25	19	55	27	18	57	19	24	53	23	24	ns	ns	*
Less than secondary	22	27	51	19	24	57	20	21	59	27*	26	47*	ns	ns	ns
Secondary diploma	44	16f	40	38	31	31	34	21f	46	40*	23	38*	ns	ns	ns
Some post-secondary	49	23	28	50	25	25	52	16f	31	44*	21	35*	ns	ns	ns
University degree†	60	30	10f	68	22	11f	61	19	20	62	23	15	ns	ns	ns
Low income	..	..	..	..	..	..	12f	28f	60	30*	22f	48*	..	..	..
Middle income	..	..	..	..	..	..	38	19	43	38*	27*	35	..	..	..
High income†	..	..	..	..	..	..	54	17	30	55	17	29	..	..	..
Not stated	..	..	..	..	..	..	42	18f	40	39*	33*	28	..	..	..

† Moderate sampling variability - interpret with caution.

.. Data not available.

* Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 5.
TYPE OF DRINKER AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

1996	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Abstainer	5	4[E]	5[E]	5[E]	4[E]	[F]	3[E]	6[E]	12[E]
Former	17	16	18	26	11	10[E]	13	24	32[E]
Light Infrequent	30	17	43	19	38	31	28	32	30[E]
Light Frequent	22	29	15	8[E]	32	12[E]	26	25	[F]
Heavy Infrequent	14	16	13	25	7	22[E]	16	8[E]	[F]
Heavy Frequent	13	18	6[E]	17	9	22[E]	13	6[E]	11[E]

2002	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Abstainer	4	3[E]	6	5[E]	4[E]	7[E]	2[E]	3[E]	11[E]
Former	17	16	19	25	11	8[E]	14	23	36
Light Infrequent	29	19	40	23	34	29	33	26	21[E]
Light Frequent	22	28	16	7	35	12[E]	23	29	17[E]
Heavy Infrequent	15	16	13	24	7	24	15	10	9[E]
Heavy Frequent	12	17	7	17	9	20	13	9	[F]

2004	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Abstainer	5	5[E]	6[E]	6[E]	5[E]	13[E]	[F]	4[E]	13[E]
Former	17	15	19	24	11	[F]	16	22	32
Light Infrequent	31	22	40	20	40	32	29	31	34
Light Frequent	16	19	12	7[E]	23	[F]	15	23	10[E]
Heavy Infrequent	16	18	14	26	7[E]	22[E]	19	12	[F]
Heavy Frequent	15	21	9	17	13	21[E]	21	8[E]	[F]

2006	Total	Male	Female[†]	Aboriginal	Non-Aboriginal[†]	15-24[†]	25-39	40-59	60+
Abstainer	6	4[E*]	8	7*	4[E]	11[E]	3[E*]	3[E*]	13[E]
Former	17	13*	21	25*	10	10[E]	10	21*	40*
Light Infrequent	27	23*	31	21*	33	27	32	26	17[E*]
Light Frequent	23	27*	20	14*	32	12[E]	24*	30*	22*
Heavy Infrequent	14	16*	12	22*	8	25	16*	10*	[F]
Heavy Frequent	12	17*	8	12	13	16	15	10*	[F]

[E] Moderate sampling variability - interpret with caution.
[F] High sampling variability - data was suppressed.
[†] Reference category - basis of comparison for the other categories.
* Significant difference at the .05 level.

TABLE 6.
HEAVY DRINKING AT LEAST ONCE PER MONTH AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	33	41	46	45	*
Male	42	50	59	50*	*
Female†	23	30	32	39	*
15-24†	44	56	64	60	*
25-39	37	41	49	47*	*
40-59	18	31	35	38*	*
60+	26F	28F	26F	27F*	ns
Aboriginal	49	51	65	56*	ns
Non-Aboriginal†	24	33	33	37	*
Less than secondary	40	53	63	52*	*
Secondary diploma	42	42	54	50*	ns
Some post-secondary	30	34	36	49*	*
University degree†	19	25	29	25	ns
Low income	..	..	60	53*	..
Middle income	..	..	45	46*	..
High income†	..	..	40	38	..
Not stated	..	..	52	55*	..

F Moderate sampling variability - interpret with caution.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 7.
HEAVY DRINKING AT LEAST ONCE PER WEEK AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	16	13	15	14	ns
Male	23	17	21	18*	*
Female†	8E	8	8	9	ns
15-24†	25	15E	14	19	ns
25-39	15	13	17	14	ns
40-59	8	10	13	13	ns
60+	19	12E	..	..	..
Aboriginal	25	17	22	16	*
Non-Aboriginal†	11	10	9	13	ns
Less than secondary	19	18	22	16*	ns
Secondary dipl;oma	21E	14E	16E	17*	ns
Some post-secondary	16	11E	15E	16*	ns
University degree†	7E	5E	5E	7E	ns
Low income	..	..	17E	11E	..
Middle income	..	..	14	15	..
High income†	..	..	11	13	..
Not stated	..	..	21E	18E	..

E Moderate sampling variability - interpret with caution.

F High sampling variability - data was suppressed.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; -- No significance test.

TABLE 8.
HARMFUL AND HAZARDOUS DRINKING (AUDIT) AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 2004 AND 2006

Demographics	2004	2006
Total	41	37
Male	52	44*
Female†	29	28
15-24†	63	48
25-39	46	36*
40-59	26	34*
60+	19E	18E*
Aboriginal	69	54*
Non-Aboriginal†	22	25
Less than secondary	71	55*
Secondary diploma	44	38*
Some post-secondary	27	34*
University degree†	16E	15
Low income	77	59*
Middle income	39	37*
High income†	28	27
Not stated	46	45*

E Moderate sampling variability - interpret with caution.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level.

TABLE 9.
LIFETIME CANNABIS USE AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996-2006

Demographics	1996	2002	2004	2006	Trend
Total	53	56	60	60	*
Male	58	61	68	65*	*
Female†	48	52	51	55	*
15-24†	56	67	71	64	ns
25-39	66	65	66	66	ns
40-59	42	53	59	62	*
60+	‡	‡	14E	24*	-
Aboriginal	53	58	64	66*	*
Non-Aboriginal†	53	55	56	55	ns
Less than secondary	42	54	58	59	*
Secondary diploma	63	56	64	69*	ns
Some post-secondary	61	61	62	58	ns
University degree†	54	56	57	57	ns
Low income			58	59	-
Middle income			60	60	-
High income†			63	61	-
Not stated			57	59	-

E Moderate sampling variability - interpret with caution.

F High sampling variability - data was suppressed.

‡ Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; - No significance test.

TABLE 10.
CANNABIS USE IN THE PAST 12 MONTHS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996-2006

Demographics	1996	2002	2004	2006	Trend
Total	16	21	21	20	*
Male	20	25	26	26*	*
Female†	11	16	15	13	ns
15-24†	29	45	46	36	ns
25-39	19	20	22	23*	ns
40-59	5E	11	9E	13*	*
60+	F	F	F	F	
Aboriginal	23	30	30	28*	ns
Non-Aboriginal†	10	13	12	13	ns
Less than secondary	23	31	32	30*	ns
Second ary diploma	17E	20	21	24*	*
Some post-secondary	11E	13	16	15*	ns
University degree†	7E	10E	7E	5E	ns
Low income	..	..	33	25*	..
Middle income	..	..	19	19	..
High income†	..	..	12E	15	..
Not stated	..	..	27	29*	..

E Moderate sampling variability - interpret with caution.

F High sampling variability - data was suppressed.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; - No significance test.

TABLE 11.
LIFETIME USE OF OTHER ILLICIT DRUGS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996[1]	2002[2]	2004[2]	2006[2]	Trend
Total	18	16	18	17	ns
Male	24	19	24	23[*]	ns
Female[†]	11	12	11	11	ns
15-24[†]	18[E]	14[E]	19	20	ns
25-39	22	16	22	22	ns
40-59	15	20	17	16	ns
60+	[F]	[F]	[F]	[F]	[F]
Aboriginal	17	13	19	15	ns
Non-Aboriginal[†]	18	18	17	19	ns
Less than secondary	13	12	14	15	ns
Secondary diploma	19[E]	14	25	21	ns
Some post-secondary	23	21	22	19	ns
University degree[†]	16[E]	18	13[E]	15	ns
Low income	[F]	[F]	12[E]	13[E]	[F]
Middle income	[F]	[F]	20	16	[F]
High income[†]	[F]	[F]	17	20	[F]
Not stated	[F]	[F]	19[E]	18	[F]

[1] Includes Cocaine, Hallucinogens, Speed & Heroin.

[2] Includes Cocaine, Hallucinogens, Speed, Ecstasy & Heroin.

[E] Moderate sampling variability - interpret with caution.

[†] High sampling variability - data was suppressed.

[F] Data not available.

[*] Significant difference at the .05 level; ns not significant; [F] No significance test.

TABLE 12.
TYPE OF OTHER ILLICIT DRUG USE AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

1996	Lifetime	Male	Female	Aboriginal	Non-Aboriginal	15 to 39	40+	Past Year
Cocaine or Crack	10	14	5[E]	10	9	11	7[E]	1[E]
Hallucinogens	14	20	9	14	14	16	10	[F]
Speed	6	8[E]	3[E]	4[E]	7	6[E]	5[E]	[F]
Ecstasy								
Heroin	1[E]	[F]	[F]	[F]		[F]	[F]	[F]
Any in Past 12 months	2[E]	3[E]	[F]	3[E]		3[E]	[F]	n/a
2002	**Lifetime**	**Male**	**Female**	**Aboriginal**	**Non-Aboriginal**	**15 to 39**	**40+**	**Past Year**
Cocaine or Crack								
Hallucinogens								
Speed								
Ecstasy								
Heroin								
Any in Past 12 months	2+	2[E]	[F]	[F]	2[E]	2[E]	[F]	n/a
2004	**Lifetime**	**Male**	**Female**	**Aboriginal**	**Non-Aboriginal**	**15 to 39**	**40+**	**Past Year**
Cocaine or Crack	12	16	7[E]	15	9	14	9	2[E]
Hallucinogens	12	17	6[E]	12	11	13	11	[F]
Speed	3[E]	4[E]	2[E]	[F]	4[E]	[F]	4[E]	[F]
Ecstasy	3[E]	3[E]	3[E]	5[E]		5[E]	[F]	[F]
Heroin	1[E]	[F]	[F]	[F]		[F]	2[E]	[F]
Any in Past 12 months	3[E]	5[E]	[F]	4[E]		5	[F]	n/a
2006	**Lifetime**	**Male**	**Female**[1]	**Aboriginal**	**Non-Aboriginal**[1]	**15 to 39**[1]	**40+**	**Past Year**
Cocaine or Crack	11	15	7	10	12	14	8	3[E]
Hallucinogens	12	16	7	9	15	14	9	2[E]
Speed	3	5[E]	2[E]	3[E]	4[E]	3[E]	3[E]	[F]
Ecstasy	4	6[E]	2[E]	3[E]	5[E]	7	[F]	2[E]
Heroin	[F]	[F]	[F]	[F]	[F]	[F]	[F]	[F]
Any in Past 12 months	4	6[E]	[F]	4[E]	3[E]	6	[F]	n/a

[E] Moderate sampling variability - interpret with caution.

[F] High sampling variability - data was suppressed.

.. Data not available.

[1] Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 13.

SMOKING STATUS IN PAST 12 MONTHS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996					2002					2004[1]					2006					Trend				
	Current	Daily	Non-daily	Former	Never	Current	Daily	Non-daily	Former	Never	Current	Daily	Non-daily	Former	Never	Current	Daily	Non-daily	Former	Never	Current	Daily	Non-daily	Former	Never
Total	44	39	6	26	30	46	35	10	21	34	40	29	11	22	38	41	30	11	25	35	..	..	..	..	..
Male	44	39	6[E]	25	31	46	35	11	21	33	42	30	12	22	36	44[*]	32	12	26	29[*]	..	..	..	..	..
Female	45	38	6[E]	26	30	45	35	10	20	35	38	27	10	22	40	37	28	9	23	40	..	..	..	..	..
15-24[1]	53	45	9[E]	20[E]	27[E]	60	41	19	7[E]	33	45	29	16	10[E]	46	46	31	15	10[E]	44	..	..	..	..	..
25-39	45	40	5[E]	23	32	47	37	10	17	37	42	31	11	20	38	42	30	11	22	36	..	..	..	..	..
40-59	40	35	5[E]	30	30	39	32	7[E]	31	31	37	29	8	28	35	41	32	9[E]	33[*]	26[*]	..	..	..	..	..
60+	31[E]	27[E]	[F]	41	27[E]	33	29	[F]	34	33	31	23	9[E]	40	29	26[*]	21	[F]	36[*]	38	..	..	..	..	..
Aboriginal	63	53	10	22	16	61	46	16	18	21	58	40	19	19	23	54[*]	36[*]	18	25	21[*]	..	..	..	..	..
Non-Aboriginal[2]	31	28	3[E]	28	41	32	26	6	23	45	24	20	4	25	51	29	24	4[E]	24	47	..	..	..	..	..
Less than secondary	59	51	8[E]	21	20	58	45	13	20	22	58	41	17	16	26	54	37[*]	17[*]	21	25[*]	..	..	..	..	..
Secondary diploma	50	47	[F]	29	20	46	35	10[E]	18	36	40	31	9	27	33	43[*]	32[*]	11[*]	27	30[*]	..	..	..	..	..
Some post-secondary	38	32	6[E]	27	35	44	34	10[E]	21	35	39	28	11	23	38	40[*]	32[*]	8[E]	28	32[*]	..	..	..	..	..
University degree[2]	17	13[E]	[F]	29	54	21	16	5[E]	25	54	12	8E	4[E]	26	62	16	14	[F]	26	58	..	..	..	..	..
Low income	..	..	..	..	..	..	..	..	..	..	65	44	21	16	20	49[*]	30	19[*]	22	28[*]	..	..	..	..	..
Middle income	..	..	..	..	..	..	..	..	..	..	38	30	9	22	40	43[*]	34[*]	9	26	31[*]	..	..	..	..	..
High income[2]	..	..	..	..	..	..	..	..	..	..	26	19	7[E]	27	47	31	24	7[E]	27	42	..	..	..	..	..
Not stated	..	..	..	..	..	..	..	..	..	..	39	28	11	22	39	50[*]	36[*]	14[*]	18[*]	32[*]	..	..	..	..	..

[1] Estimates are derived from the average of the 2004 NTHMS and 2004 NWT Addictions Surveys.

[E] Moderate sampling variability - interpret with caution.

[F] High sampling variability - data was suppressed.

.. Data not available.

[2] Reference category - basis of comparison for the other categories.

[*] Significant difference at the .05 level; [ns] not significant. No significance test.

TABLE 14.
AVERAGE NUMBER OF SMOKES PER DAY AMONG DAILY SMOKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	14	15	14	12	*
Male	16	16	16	14[†]	*
Female[†]	12	14	12	11	ns
15-24[†]	10	12	12	12	ns
25-39	14	15	14	11	*
40-59	17	17	16	14	*
60+	13	14	11[E]	11	ns
Aboriginal	12	14	12	10[E]	*
Non-Aboriginal[†]	16	16	17	15	ns
	12	14	13	11	ns
Secondary diploma	16	15	16	12	*
Some post-secondary	15	17	14	14	ns
University degree[†]	14	15	11[E]	11	ns
Low income			11	11	
Middle income			15	13	*
High income[†]			16	14	*
Not stated			16	9	*

[E] Moderate sampling variability - interpret with caution.

.. Data not available.

[†] Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; * No significance test.

TABLE 15.
QUIT RATES AMONG 'EVER SMOKERS' AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	36	31	35	38	ns
Male	36	31	34	37	ns
Female[†]	36	30	36	38	ns
15-24[†]	27[†]	11[†]	18[†]	18[†]	ns
25-39	33	26	31	34*	ns
40-59	42	44	42	44*	ns
60+	56	50	56	58*	ns
Aboriginal	25	22	24	32*	*
Non-Aboriginal[†]	47	41	44	43	ns
Less than secondary	26	25	24	27*	ns
Secondary diploma	36	28	34	38*	ns
Some post-secondary	41	32	31	41*	ns
University degree[†]	63	54	74	62	ns
Low income			16	31*	
Middle income			35	38*	
High income[†]			53	47	
Not stated			38	27*	

[†] Moderate sampling variability - interpret with caution.

.. Data not available.

[†] Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 16.
PREVALENCE OF LIFETIME CHEWING TOBACCO USE AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	16	18	19	19	ns
Male	23	27	27	28*	ns
Female†	9	7	11	8	ns
15-24†	19E	19	25	17	ns
25-39	18	19	19	19	ns
40-59	11E	14	17	19	*
60+	19E	21E	15E	18E	ns
Aboriginal	27	26	26	22*	*
Non-Aboriginal†	8	10	13	15	*
Less than secondary	28	25	23	21*	ns
Secondary diploma	9E	14	22	15	ns
Some post-secondary	10E	16	19	21*	*
University degree†	8E	9E	11E	14	*
Low income	..	..	23	24	..
Middle income	..	..	19	16	..
High income†	..	..	17	19	..
Not stated	..	..	17E	17	..

E Moderate sampling variability - interpret with caution.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; ' No significance test.

TABLE 17.
PREVALENCE OF CHEWING TOBACCO USE IN THE PAST 12 MONTHS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006.

Demographics	1996	2002	2004	2006	Trend
Total	3[F]	4	3[F]	3[F]	**
Male	3[F]	5[F]	[F]	3[F]	**
Female	3[F]	3[F]	4[F]	2[F]	**
15-24	[F]	[F]	[F]	[F]	
25-39	3[F]	5[F]	3[F]	3[F]	**
40-59	[F]	3[F]	[F]	3[F]	
60+	[F]	8[F]	[F]	[F]	
Aboriginal	7[F]	8	6[F]	4[F]	**
Non-Aboriginal	[F]	[F]	[F]	[F]	

E Moderate sampling variability - interpret with caution.

F High sampling variability - data was suppressed.

* Significant difference at the .05 level; ** not significant; _ No significance test.

TABLE 18.
HARM IN THE PAST 12 MONTHS FROM OWN DRINKING AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 2004 AND 2006

Demographics	2004	2006
Total	22	21
Male	23	22
Female†	20	19
15-24†	44	34
25-39	20	18*
40-59	12E	15*
60+	F	22E
Aboriginal	44	32*
Non-Aboriginal†	6E	12
Less than secondary	49	35*
Secondary diploma	21E	25*
Some post-secondary	8E	12E*
University degree†	F	6E
Low income	54	28*
Middle income	22	20*
High income†	7E	13
Not stated	28E	34E*

E Moderate sampling variability - interpret with caution.

F High sampling variability - data was suppressed.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level.

TABLE 19.
HARM FROM OTHER PEOPLE'S DRINKING IN PAST 12 MONTHS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

Demographics	1996	2002	2004	2006	Trend
Total	55	53	56	53	ns
Male	54	56	60	56*	ns
Female†	56	51	51	49	-
15-24†	76	73	78	66	ns
25-39	52	54	56	53*	ns
40-59	50	46	49	50*	ns
60+	26[E]	28[E]	29	33*	ns
Aboriginal	63	64	63	62*	ns
Non-Aboriginal†	49	44	50	44	ns
Less than secondary	59	58	64	56*	ns
Secondary diploma	57	57	51	63*	ns
Some post-secondary	56	53	52	49*	ns
University degree†	43	41	52	41	ns
Low income	..	..	64	55	-
Middle income	..	..	59	53	-
High income†	..	..	47	48	-
Not stated	..	..	57	63*	-

[E] Moderate sampling variability - interpret with caution.

[F] High sampling variability - data was suppressed.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; - No significance test.

TABLE 20.
DRIVING WITHIN AN HOUR OF DRINKING AT LEAST 2+ DRINKS AMONG CURRENT DRINKERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2004	2006	Trend
Total	21	19	17	14	*
Male	29	27	21	18*	*
Female†	10[F]	7[F]	13	8[F]	ns
15-24†	23[F]	23[F]	25[F]	20[F]	ns
25-39	23	20	18	13	*
40-59	16[F]	14	14	13	ns
60+	[F]	[F]	[F]	[F]	
Aboriginal	24	26	28	19*	
Non-Aboriginal†	19	15	11	10	*
Less than secondary	17[F]	24	21[F]	20*	ns
Secondary diploma	20[F]	18	14[F]	16[F]*	ns
Some post-secondary	24	17	22	14[F]*	*
University degree†	21	13[F]	12[F]	5[F]	*
Low income			26[F]	14[F]	
Middle income			19	14	
High income†			18	12	
Not stated			[F]	18[F]	

[F] Moderate sampling variability - interpret with caution.

[F] High sampling variability - data was suppressed.

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 21.
PROPORTION OF CURRENT GAMBLERS AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2006	Trend
Total	78	73	72	*
Male	81	73	73	*
Female†	76	73	71	*
15-24†	75	73	67	n.s.
25-39	82	75	73	*
40-59	73	73	73	n.s.
60+	84	69	76	n.s.
Aboriginal	84	80	76*	*
Non-Aboriginal†	75	67	68	*
Less than secondary	78	76	72*	n.s.
Secondary diploma	81	74	74*	n.s.
Some post-secondary	83	74	76*	n.s.
University degree†	68	66	63	n.s.
Low income			72	-
Middle income			75	-
High income†			72	-
Not stated			66	-

Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ** not significant; - No significance test.

TABLE 22.
MULTIPLE TYPES OF GAMBLING IN PAST YEAR AMONG CURRENT GAMBLERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006.

Demographics	1996		2002		2006		Trend	
	1	2+	1	2+	1	2+	1	2+
Total	30	70	32	68	31	69	ns	ns
Male	28	72	31	69	30	70	ns	ns
Female†	34	66	33	67	32	68	ns	ns
15-24†	19	81	27	73	34	66	*	*
25-39	29	71	30	70	23*	77*	ns	ns
40-59	35	65	36	64	33	67	ns	ns
60+	48	52	41	59	41	59	ns	ns
Aboriginal	21	79	24	76	27*	73*	ns	ns
Non-Aboriginal†	38	62	40	60	35	65	ns	ns
Less than secondary	21	79	30	70	31	69	*	*
Secondary diploma	29	71	32	68	28	72	ns	ns
Some post-secondary	33	67	32	68	32	68	ns	ns
University degree†	49	51	40	60	32	68	*	*
Low income					33	67		
Middle income					27	73		
High income†					30	70		
Not stated					38	62		

.. Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; - No significance test.

TABLE 23.
TYPES OF GAMBLING IN THE PAST YEAR AMONG CURRENT GAMBLERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996-2006.

1996	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Bingo	32	23	42	54	14	26[E]	31	34	45
Scratch tickets	12	15	8[E]	8E	15	24[E]	11	6[E]	[F]
Lottery tickets	66	69	64	49	80	44	71	76	59
Card games	53	48	59	62	46	58	53	50	53
Sports events	30	35	25	39	22	40	32	20	23[E]
VLT	12	16	8[E]	11[E]	13	18[E]	10	15[E]	[F]
Slot machines	10	12	8[E]	10[E]	10	[F]	9[E]	12[E]	[F]
Casino games	7	11	3[E]	9[E]	6[E]	[F]	9[E]	5[E]	[F]
Pool	18	28	7[E]	22	14	37	18	8[E]	[F]
Other types	10	15	6[E]	15	7[E]	30[E]	8[E]	[F]	[F]

2002	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Bingo	41	29	55	64	17	46	40	36	55
Scratch tickets	46	41	52	50	42	50	48	42	48
Lottery tickets	57	59	54	42	72	30	61	71	55
Card games	27	29	24	35	18	40	28	19	19[E]
Sports events	14	23	4[E]	12	15	22[E]	13	12	[F]
VLT	12	12	11	11	13	9[E]	12	14	F
Slot machines	18	18	18	18	18	17[E]	17	22	10[E]
Casino games	9	12	7	9	10	11[E]	8[E]	11	[F]
Pool	12	18	5[E]	16	8	30	11	4[E]	[F]
Other types	6	9	2[E]	7[E]	4[E]	13[E]	4[E]	3[E]	[F]

2006	Total	Male	Female†	Aboriginal	Non-Aboriginal	15- 24†	25 to 39	40 to 59	60+
Bingo	33	24*	44	56*	9	29	33	30	51*
Scratch tickets	49	45*	55	56*	42	56	51	48	36*
Lottery tickets	63	67*	58	52*	74	33	66*	78*	58*
Card games	32	43*	20	33	31	52	38*	20*	15[E]*
Sports events	10	15*	5E	9	11	16[E]	9[E]*	10[E]*	[F]
VLT	11	10	12	12	10	6[E]	14	11	[F]
Slot machines	21	19	22	23*	17	14[E]	26	21	16[E]
Casino games	10	15*	5E	11	9	13[E]	14	6[E]	[F]
Pool	7	11*	2E	7	6[E]	19[E]	4[E]	4[E]	[F]
Other types	14	14	13	11*	17	7[E]	14	16	16[E]
Internet	4[E]	6[E]	[F]	2[E]	5[E]	7[E]	4[E]	[F]	[F]

Trend	Total	Male	Female	Aboriginal	Non-Aboriginal	15-24	25-39	40-59	60+
Bingo	ns	ns	ns	ns	*	ns	ns	ns	ns
Scratch tickets	*	*	*	*	*	*	*	*	-
Lottery tickets	ns	ns	ns	ns	ns	ns	ns	ns	ns
Card games	*	*	*	*	*	ns	*	*	*
Sports events	*	*	*	*	*	*	*	*	-
VLT	ns	*	*	ns	ns	-	-	-	-
Slot machines	*	*	*	*	*	-	-	-	-
Casino games	*	ns	ns	ns	ns	-	-	-	-
Pool	*	*	*	*	*	-	-	-	-
Other types	*	*	*	ns	*	-	-	-	-

[E] Moderate sampling variability - interpret with caution.

[F] High sampling variability - data was suppressed.

- Data not available.

† Reference category - basis of comparison for the other categories.

* Significant difference at the .05 level; ns not significant; - No significance test.

TABLE 24:
AVERAGE MONEY SPENT IN A TYPICAL WEEK OF GAMBLING AMONG CURRENT GAMBLERS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 – 2006

Demographics	1996	2002	2006	Trend
Total	45	45	44	ns
Male	45	44	44	ns
Female[1]	45	46	45	ns
15-24[1]	45	44[1]	46	ns
25-39	45	43	45	ns
40-59	43	46	40	ns
60+	53	41	52	ns
Aboriginal	60	68	62*	ns
Non-Aboriginal[1]	33	17	24	*
Less than secondary	70	58	62*	ns
Secondary diploma	32	34[1]	39*	ns
Some post-secondary	30	50[1]	39*	ns
University degree[1]	35	14[1]	22[1]*	*
Low income			55*	
Middle income			44	
High income[1]			38	
Not stated			47	

[1] Moderate sampling variability - interpret with caution.

Data not available.

* Significant difference at the .05 level; ns not significant; No significance test.

TABLE 25.
PREVALENCE OF REGULAR GAMBLING AMONG RESIDENTS AGED 15+ BY SELECT DEMOGRAPHICS, NWT 1996 - 2006

Demographics	1996	2002	2006	Trend
Total	29	25	23	*
Male	29	25	25	**
Female[1]	30	25	20	*
15-24[1]	23[1]	18	20	**
25-39	27	22	19	*
40-59	33	30	24	*
60+	44	38	39	**
Aboriginal	39	33	29[1]	*
Non-Aboriginal[1]	22	18	16	*
Less than secondary	41	31	32[1]	**
Secondary diploma	26	27	21[1]	*
Some post-secondary	27	22	20[1]	*
University degree[1]	12[1]	15	13	**
Low income			27	
Middle income			22	
High income[1]			21	
Not stated			25	

[1] Moderate sampling variability - interpret with caution.

.. Data not available.

* Significant difference at the .05 level; ** not significant; No significance test.

If you would like this information in another official language, call us.

English

Si vous voulez ces informations en français, contactez-nous.

French

Kīspin ki nitawihtin ē nihiyawihk ōma ācimōwin, tipwāsinān.

Cree

TLICHO YATI K'ÈÈ. DI WEGODI NEWO DÈ. GOTS'O GONEDE

Tłı̨chǫ

ʔERIHTL'IS DENE SUŁINÉ YATI T'A HUTS'ELKÉR
XA BEYAYATI THEʔA ʔAT'E, NUWE TS'ÉN YÓŁTŁ.

Chipewyan

EDI GONDI DEHGÁH GOT'IE ZHATIÉ K'ÉÉ
EDATŁ'ÉH ENAHDDHÉ NIDÉ.

South Slavey

K'AHSHÓ GOT'ĮNE XƏDƏ K'É HEDERI
ʔEDIHTL'É YERINIWĘ NÍDÉ DÚLE.

North Slavey

Jii gwandak izhii ginjik vat'atr'ijahch'uu zhit
yinohthan jî', diits'àt ginohkhìi.

Gwich'in

UVANITTUAQ ILITCHURISUKUPKU INUVIALUKTUN, QUQUAQLUTA.

Inuvialuktun

ᑕᓂᐊ ᑎᑎᖅᑐᑦ ᐱᓕᒍᐱᑦ ᐃᓄᖅᑎᑕᐅᓯᒪᓕᕆᑎᑦ,
ᐅᖃᖅᑎᖅᓄᑦ ᐅᖄᓚᐅᖏᓐᓇᖅᑐᑦ

Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.

Inuinnaqtun

Northwest Territories Health and Social Services